

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

HONOLULU ETHICS COMMISSION RECEIVED

31.12.18

18 JAN 12 P1:47

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Hamasakí, Peter James /		808-529-7333
MAILING ADDRESS (Street)		FAX 808-524-8293
Five Waterfront Plaza, Suite 400		000-324-0293
500 Ala Moana Boulevard		EMAIL
		hamasaki@m4law.com
(City) Honolulu	(State) Hawaii	(Zip Code)
Honolulu	Hawaii	96813
LOBBYIST FIRM/EMPLOYER (Fill in only if y	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
McCorriston Miller Mukai MacKinnon LLP		808-529-7300
MAILING ADDRESS (No. and Street or	P.O Box)	FAX 808-524-8293
P. O. Box 2800		000-324-0293
		EMAIL
		info@m4law.com
(City) Honolulu	(State) Hawaii	(Zip Code)
Honolulu	пажан	96803-2800

PART II ORGANIZATIO	ON	
NAME OF ORGANIZATION YO	U LOBBY FOR (Do not abbreviate)	TELEPHONE
Charley's Taxi Radio Dispatch Corp	o ' .	
MAILING ADDRESS (No. and S	Street or P.O Box)	FAX
1451 S. King Street, Suite 300		
		EMAIL
(City)	(State) Hawaii	(Zip Code)
'Honolulu	` ´ Hawaii	96814

PART III EXPENDI	IURES, BY ITPE		
Political Contributions	Amount \$0.00	Receptions, Meals, Food & Beverages	Amount \$0.00
Preparation & Distribution of Lobbying Materials	Amount \$0.00	Media Advertising	Amount \$0.00
Entertainment & Events	Amount \$0.00	Other	
		TOTAL \$0.00	

Fees Legal Fees		F LOBBYING Amount \$7,125.00	
Compensation		Amount \$0.00	
Contributions		Amount \$0.00	
Membership Fees		Amount \$0.00	
☐ Check here if additional sheets are attached		□ n/a	
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi		□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
			□Specific Legislation:
☑Transportation	□Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			<u> </u>
DADTI// DALIAN/ 55441/11			
		ECISIONS	YOU SOUGHT TO
INFLUENCE AND OUTC	OME	ECISIONS 4.	YOU SOUGHT TO
1. Potential amendments to Ord. 16-2	OME 25 - no enactment.		YOU SOUGHT TO
INFLUENCE AND OUTC	OME 25 - no enactment.	4. 5.	YOU SOUGHT TO e if additional sheets are attached
1. Potential amendments to Ord. 16-2 2. Potential amendments to Ord. 16-3 3.	25 - no enactment. 28 - no enactment.	4. 5.	
1. Potential amendments to Ord. 16-2. Potential amendments to Ord. 16-3. 2. Potential amendments to Ord. 16-3. 3. PART VII LOBBYIST CE	25 - no enactment. 28 - no enactment. RTIFICATION	4. 5. □ Check her	e if additional sheets are attached
1. Potential amendments to Ord. 16-2. Potential amendments to Ord. 16-3. 3.	25 - no enactment. 28 - no enactment. RTIFICATION	5. Check her	e if additional sheets are attached
1. Potential amendments to Ord. 16-2. Potential amendments to Ord. 16-3. 3. PART VII LOBBYIST CE I hereby certify that the foregoing s	25 - no enactment. 28 - no enactment. RTIFICATION	5. Check her Subscribed ar This da	e if additional sheets are attached
1. Potential amendments to Ord. 16-2. Potential amendments to Ord. 16-3. 3. PART VII LOBBYIST CE I hereby certify that the foregoing s	25 - no enactment. 28 - no enactment. RTIFICATION	Subscribed ar This Oda By:	e if additional sheets are attached
1. Potential amendments to Ord. 16-2 2. Potential amendments to Ord. 16-3 3. PART VII LOBBYIST CE I hereby certify that the foregoing sand correct.	25 - no enactment. 28 - no enactment. RTIFICATION	Subscribed ar This Oda By:	e if additional sheets are attached and sworn to before me ay of
1. Potential amendments to Ord. 16-2 2. Potential amendments to Ord. 16-3 3. PART VII LOBBYIST CE I hereby certify that the foregoing sand correct. LOBBYIST SIGNATURE January 10,2018	25 - no enactment. 28 - no enactment. RTIFICATION	Subscribed ar This Office da	e if additional sheets are attached and sworn to before me ay of

NOTARY PUBLIC Neelani N. Jinbo Dog Description:	MALL PENSTRUCTIONS
No. of Pages:	Date of Doc. JAN 1 0 7/118
Notary Signature	JAN 1 0 201 Date





925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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HONOLULU ETHICS COMMISSION RECEIVED

31.12.18

ANNUAL REPORT

18 JAN 10 P3:05

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle	*)			TELEPHONE
Hannemann Mullufi F.				(808) 923-0407
MAILING ADDRESS (Street	•			FAX (808) 924-3843
2270 Kalakaua Avenue Suite	1702			EMAIL
				mhannemann@hawaiilodging.or
(City)		(State) HI		(Zip Code)
Honolulu		(HI		96815
LOBBYIST FIRM/EMPLOY	ER (Fill in only if yo	ou are employed by a busine	ess entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. a	and Street or	P.O Box)		FAX
				EMAIL
1011		1.01		(7: 0 1)
(City)		(State)		(Zip Code)
PART II ORGANIZA	TION			
NAME OF ORGANIZATION		BY FOR (Do not a	abbreviate)	TELEPHONE
Hawaii Lodging & Tourism Ass				(808) 923-0407
MAILING ADDRESS (No. a		P.O Box)	A	FAX
2270 Kalakaua Avenue Suite				(808) 924-3843
				EMAIL info@hawaiilodging.org
(City) Honolulu		(State)		(Zip Code)
Honolulu		HI		96815
DADT III EVDENDI	IIIDEO E	TVDE		
PART III EXPENDIT		3Y IYPE		
Political Contributions	Amount		Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	i s	Media Advertising	Amount
Entertainment & Events	Amount	-	Other	

Deadline: January 10th of Each Year NOTE: This is a public document

TOTAL

YOU RECEIVED FOR	Fees		Amount	
	situate 100/ of convert and a		700	
Compensation Lobbying constitutes 10% of annual salary		Amount \$18,700		
Contributions		Amount		
Membership Fees			Amount	
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTION	ON OF SUBJECTS	ON WHICH	YOU LOBBIED	
☑ Business & Economic Development	☑Community Servi	ces	⊠ Customer Services	
☑Culture & Arts	⊠Housing			
☑Parks & Recreation	⊠ Public Health, Sa	fety & Welfare	⊠Tourism	
☑Transportation	⊠Zoning & Plannin	g	□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
☐Other (indicate below):				
PART VI POLICY MAINFLUENCE AND OU		ECISIONS	YOU SOUGHT TO	
	JTCOME	1.	YOU SOUGHT TO C to support the GET surcharge for the Rail	
INFLUENCE AND OU	DTCOME or Hotels: Reso 17-70	4. Urging HSA	C to support the GET surcharge for the Rail	
1. Real Property Tax Increase for	or Hotels: Reso 17-70	4. Urging HSA0		
1. Real Property Tax Increase for 2. County enforcement on trans	or Hotels: Reso 17-70 ient vacation rentals rships for rail improvements	4. Urging HSA0	C to support the GET surcharge for the Rail	
1. Real Property Tax Increase for 2. County enforcement on trans 3. Utilizing public private partner	or Hotels: Reso 17-70 ient vacation rentals rships for rail improvements CERTIFICATION	4. Urging HSA0 5. Naming of a Check her Subscribed an This 10th da BY: NOTARY OR ANY My commission	to support the GET surcharge for the Rail n entertainment venue in honor of Tom Moffat e if additional sheets are attached nd sworn to before me ay ofJanuary,2018 DEFICIAL AUTHORIZED TO ADMINISTER OATHS	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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"18 JAN 10 P12:14

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Hayashi, Clyde T.		808-845-3238
MAILING ADDRESS (Street)		FAX 808-845-8300
650 lwilei Road, #285		
		EMAIL
(City) Honolulu	(State) Hawaii	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)
DADT II ODGANIZAZION		
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBB	Y FOR (Do not abbreviate)	TELEPHONE
Hawaii LECET /		808-845-3238
MAILING ADDRESS (No. and Street or 650 Iwilei Road, #285	P.O Box)	FAX 808-845-8300
1050 IWIREI ROAd, #205		EMAIL
(City) Honolulu	(State) Hawaii	(Zip Code) 96817
DART III EYPENDITI IDES B		1555

PART III EXPENDI	TURES, BY TYPE		
Political Contributions	Amount \$.00	Receptions, Meals, Food & Beverages	Amount \$.00
Preparation & Distribution of Lobbying Materials	Amount \$.00	Media Advertising	Amount \$.00
Entertainment & Events	Amount \$.00	Other	
		TOTAL \$.00	

Fees		Amount	
Compensation		Amount	
Contributions		Amount	
Nembership Fees		Amount	
☐ Check here if additional sheets are attached		⊠ n/a	
PART V DESCRIPTION	N OF SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Serv	ices	□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	afety & Welfare	□Tourism
□Transportation	□Zoning & Plannir	g	Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.
NOILE	e (From January	2017 to S	eptember 2017)
PART VI POLICY MAK	(ING PROCESS D		
PART VI POLICY MAK	(ING PROCESS D		
PART VI POLICY MAK INFLUENCE AND OUT	(ING PROCESS D	ECISIONS	
PART VI POLICY MAK INFLUENCE AND OUT 1. N/A 2.	(ING PROCESS D	4. 5.	
PART VI POLICY MAK INFLUENCE AND OUT 1. N/A 2. 3.	(ING PROCESS D	4. 5.	YOU SOUGHT TO
PART VI POLICY MAKINFLUENCE AND OUT 1. N/A 2. 3. PART VII LOBBYIST Of the properties of the proper	CERTIFICATION	4. 5. Check her	YOU SOUGHT TO e if additional sheets are attached and sworn to before me
PART VI POLICY MAKINFLUENCE AND OUT 1. N/A 2. 3. PART VII LOBBYIST Of the the foregoing the state of the	CERTIFICATION	Subscribed ar This Ath da By: Sun h	YOU SOUGHT TO e if additional sheets are attached and sworn to before me ay of

	# Pages: 3	
Notary Name: TERRI LYNN K.K. TANDOC. Description: Qnnual Rep		le
Simmy K. K. Janah	1/9/2018	
Notary Signature	Date	Walter State



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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18 JAN 10 P12:15

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Hayashi, Clyde T.		808-841-0491
MAILING ADDRESS (Street)	***	FAX 808-847-4782
2251 North School Street		EMAIL chayashi@opcmia630.org
(City) Honolulu	(State) Hawauu	(Zip Code) 85819
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZATION			
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Masons' Union, Local 630 808-841-0491			
MAILING ADDRESS (No. and	d Street or P.O Box)	FAX 808-847-4782	
2251 North School Street		000-047-4702	
		EMAIL	
		chayashi@opcmia630.org	
(City) Honolulu	(State) Hawaii	(Zip Code)	
Horiolulu	nawaii	96819	

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount \$.00	Receptions, Meals, Food & Beverages	Amount \$.00	
Preparation & Distribution of Lobbying Materials	Amount \$.00	Media Advertising	Amount \$.00	
Entertainment & Events	Amount \$.00	Other		
		TOTAL \$.00		

PART IV FEES, COMPEN YOU RECEIVED FOR TH	-		IS AND MEMBERSHIP FEES
Fees		Amount	
Compensation		Amount	
Contributions		Amount	
lembership Fees		Amount	
☐ Check here if additional sheet	☐ Check here if additional sheets are attached		
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation	☐Zoning & Planning		Bill No(Year)Reso No(Year)Admin. Rule NoDept
PART VI POLICY MAKININFLUENCE AND OUTC	IG PROCESS D		YOU SOUGHT TO
1. N/A	ONIL	4.	
2.		5.	
3.		☐ Check her	re if additional sheets are attached
PART VII LOBBYIST CE	RTIFICATION		
I hereby certify that the foregoing statements are true and correct.			nd sworn to before me ay of <u>Januay</u> , <u>2018</u> . yw KEJanak
LOBBYIST SIGNATURE 1 - 9-18 DATE			OFFICIAL AUTHORIZED TO ADMINISTER OATHS TERRI LYNN K. K. TANAKA

Document Date: 01 9 2018	# Pages: 3		
Notary Name: TERRI LYNN K.K. TAN			
Doc Description: ANNUAL Re	eport		
Doc. Description: ANNUAL Re	epv4	6	
Doc. Description: ANNUAL Ke Junyon Kk. Janua Notary Signature		4	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)	TELEPHONE		
Jared Higashi S.	(808) 923-0407		
MAILING ADDRESS (Street)	FAX (808) 924-3843		
2270 Kalakaua Avenue Suite 1702			
		EMAIL jhigashi@hawaiilodging.org	
(City) Honolulu	(State) HI	(Zip Code) 96815	
LOBBYIST FIRM/EMPLOYER (Fill in only if y	ou are employed by a business entity that has been retained to lobby)	TELEPHONE	
MAILING ADDRESS (No. and Street or	P.O Box)	FAX	
		EMAIL	
(City)	(State)	(Zip Code)	
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBE	3Y FOR (Do not abbreviate)	TELEPHONE	
Hawaii Lodging & Tourism Association 🖊		(808) 923-0407	
MAILING ADDRESS (No. and Street or	P.O Box)	FAX (808) 924-3843	
2270 Kalakaua Avenue Suite 1702			
		EMAIL info@hawaiilodging.org	
(City) Honolulu	(State)	(Zip Code) 96815	

Political Contributions	Amount	- 0	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	* 3	Media Advertising	Amount
Entertainment & Events	Amount	7.	Other	
			TOTAL	

Deadline: January 10th of Each Year Rev. 12/2017

NOTE: This is a public document

YOU RECEIVED FOR Fees			Amount	
	70/ -5	<u> </u>		
Compensation Lobbying constitutes 7% of annual salary		Amount \$4,025		
Contributions		Amount	Amount	
lembership Fees		Amount	Amount	
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
☑Business & Economic Development	☑Community Servi		⊠ Customer Services	
Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability	
☑Parks & Recreation	☑Public Health, Sa	fety & Welfare	⊠ Tourism	
-			□Specific Legislation:	
☑Transportation	on ⊠Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept	
Other (indicate below):				
- 10.000				
		ECISIONS	YOU SOUGHT TO	
	TCOME			
INFLUENCE AND OUT	Hotels: Reso 17-70	4. Urging HSA	C to support the GET surcharge for the Rail	
3	Hotels: Reso 17-70	4. Urging HSA0	C to support the GET surcharge for the Rail	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh	Hotels: Reso 17-70 nt vacation rentals nips for rail improvements	4. Urging HSA0	C to support the GET surcharge for the Rail	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST C. I hereby certify that the foregoin	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION	4. Urging HSA0 5. Naming of a	C to support the GET surcharge for the Rail	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION Ing statements are titue of	4. Urging HSA0 5. Naming of ar	C to support the GET surcharge for the Rail n entertainment venue in honor of Tom Mof e if additional sheets are attached and sworn to before me	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST C. I hereby certify that the foregoin	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION	4. Urging HSAC 5. Naming of an Check her Subscribed ar	C to support the GET surcharge for the Rail n entertainment venue in honor of Tom Mof e if additional sheets are attached and sworn to before me	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST C. I hereby certify that the foregoin	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION Ing statements are titue of NOTARY	4. Urging HSAC 5. Naming of ar Check her Subscribed ar 10th da 8v.	C to support the GET surcharge for the Rail on entertainment venue in honor of Tom Mof e if additional sheets are attached ond sworn to before me ay of January, 2018	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST County that the foregoin and correct.	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION Ing statements are titue of NOTARY PUBLIC	4. Urging HSAC 5. Naming of ar Check her Subscribed ar This 10th da	to support the GET surcharge for the Rail n entertainment venue in honor of Tom Mor e if additional sheets are attached and sworn to before me ay ofJanuary,2018 DEFICIPLY AUTHORIZED TO ADMINISTER OATHS	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST (I hereby certify that the foregoin and correct. LOBBYIST SIGNATURE	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION Ing statements are titue of NOTARY PUBLIC	4. Urging HSAC 5. Naming of ar Check her Subscribed ar 10th da 8v.	to support the GET surcharge for the Rain entertainment venue in honor of Tom More if additional sheets are attached and sworn to before me any of	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST County that the foregoing and correct. LOBBYIST SIGNATURE LID / 2018 DATE	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION Ing statements are true of the public of t	4. Urging HSAC 5. Naming of an Check her Subscribed ar NOTARY OR ANY	to support the GET surcharge for the Rain entertainment venue in honor of Tom More if additional sheets are attached and sworn to before me any of January	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST CI I hereby certify that the foregoin and correct. 1. 10 / 20 1 8 DATE 1. 10 / 20 1 8 DATE	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION In statements are titue of the public of t	4. Urging HSAC 5. Naming of an Check her Subscribed ar Abis 10th da By NOTARY OR ANY OR 10/08/	to support the GET surcharge for the Rain entertainment venue in honor of Tom More if additional sheets are attached and sworn to before me any of January	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST CI I hereby certify that the foregoin and correct. LOBBYIST SIGNATURE 1/10/2018 DATE Rev. 12/2017	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION OF HOME NOTARY PUBLIC No. 17-425 NOTARY PUBLIC No. 17-425 NOTARY PUBLIC No. 17-425 NOTARY PUBLIC NOTARY PUBLIC No. 17-425	4. Urging HSAC 5. Naming of an Check her Subscribed ar Abis 10th da By NOTARY OR ANY OR 10/08/	to support the GET surcharge for the Rail n entertainment venue in honor of Tom More if additional sheets are attached and sworn to before me ay of January, 2018 OFFICIAL AUTHORIZED TO ADMINISTER OATHS on expires: 2021 Date: UNDATED AT THE Pages _ 2 TIME OF NOTARY Plame: Tencey L. Ogawa First Circles	
1. Real Property Tax Increase for 2. County enforcement on transier 3. Utilizing public private partnersh PART VII LOBBYIST C I hereby certify that the foregoin and correct. LOBBYIST SIGNATURE L/10/2018 DATE Rev. 12/2017	Hotels: Reso 17-70 Int vacation rentals Inips for rail improvements CERTIFICATION OF HIM NOTARY PUBLIC NO. 17-425 NOTARY PUBLIC NOTAR	4. Urging HSAC 5. Naming of an Check her Subscribed ar Abis 10th da By NOTARY OR ANY OR 10/08/	to support the GET surcharge for the Rail n entertainment venue in honor of Tom More e if additional sheets are attached and sworn to before me ay of January, 2018 OFFICIAL AUTHORIZED TO ADMINISTER OATHS on expires: 2021 Date: UNDATED AT THE Pages2 TIME OF NOTARY of Tirst Circles A graduary, 2000 First Circles Time of Notary, 2000 First Circles To support the Rail A graduary, 2018 The pages, 2018 First Circles The pages, 2018 The pages	

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

Name HIRAKI	KENNGTH	ナ	
(Print) Last	First	Middle	
Name HIRAKI (Print) Last Business Address 1177 B15 (Street, City, State)	hop St Hon 968/Bhon te, Zip Code)	ne 375	-5336
Email Address: Ken Hivaki C	msh.com		_
State name and address of organization you			e:
Hawaiian Tell 1177 Bishop St.	com Communications reet Hon Hi 96813		
State total amount received as a lobbyist repreceipts related to lobbying activities.	presenting contributions, membe	rship fees	and other
O			
State total amount expended for lobbying by	y lobbyist.		
O		77	E
List results of the legislation you sought to it	nfluence.	DEC 1	HONO HICS CO RECE
0		2 A11	LULU
Other information.		53	N N
I hereby certify that the foregoing statements			
are true and correct.	This 29th day of No	vember	_, 20 <u>17</u> .
	By Morally & Mar. Notary or any official autho	rized to adn	ninister oaths
made	GWENDOLYN A. MASSIAH		
(Signature)	My commission expires: Notary Certification on	FEB. 22, 2	

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOR RECORDS

gy21217

Doc. Date: No Dode # Pages: Nam**GWENDOLYN A. MASSIAH** Circuit Doc. Description: Cthy + Country of Hambulu
Ethics Commission Lubbyist Annual Report Form Signature A Hasse 11/29/17

NOTARY CERTIFICATION

Date

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

Name HIRA	7K1	KENN	GTH	ナ	
(Print)	Last	First		Middle	
Business Address		A			336
Email Address:	Ken Hivaki e	msn.ce	m		
State name and addres					
#	availar Telcor	n Services	Compon	7, /nc/	
	177 Bishop St				
State total amount rece receipts related to lobb		presenting contri	butions, mem	bership fees an	nd other
	O				
State total amount expe	ended for lobbying by	y lobbyist.			
	0			17	ET
List results of the legis	lation you sought to i	nfluence.		DEC 12	HONOL HICS COM RECEIV
	0			A11	MISSION MISSION
Other information.				Ġ	
I haraby antify that the	formaning statement	n Carlanaii	1 1	- 1C	
I hereby certify that the are true and correct.	e foregoing statement		l and sworn to A day of A	lovember,	20 <u>17</u> .
at	10	By Murr Notary o		thorized to admini	ister oaths
Ch &	No.	GWENDOLY	N A. MASSIA	H	
w				FEB. 22, 2020	NO WHILE
(Signatur	e <i>)</i>	Notney C	ettication	an terrese	Side Is n
724		J			* * *

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOR RECORDS

8/2.12.17

	Doc. Date: No Date	# Pag	ges:
	NanGWENDOLYN A.	MASSIAH	Circuit
	Doc. Description: CHy	- Country of House	lulu
	Ethres Commission Lib	byist Annual	Report Form
HAIR	Yournell & My	asut	11/29/17
	Signature /	DELENATION	Date
	NOTARY CE	RTIFICATION	



CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

Name HIRAKI KENNGTH T. (Print) Last First Middle
Business Address 1177 B15hop St Han 9681 Shone 375-5336 (Street, City, State, Zip Code)
Email Address: Ken Hivaki emsn. com
State name and address of organization you lobbied for.
Hawaiia Telcom, Inc.
1177 Bishop St How th 96813
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.
O
State total amount expended for lobbying by lobbyist.
O ETHICSE
List results of the legislation you sought to influence. Persolution 17-68 Persolution passed Other information
resolution passed
Other information.
I hereby certify that the foregoing statements Subscribed and sworn to before me
are true and correct. This 29th day of November, 2017.
By Notary of any official authorized to administer oaths GWENDOLYN A. MASSIAH
(Signature) My commission expires: FEB. 22, 2020 Notary Certification on Taxable Side

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOR RECORDS

912.12.17

	Doc. Date: No Date # Page	es:(
	Nam GWENDOLYN A. MASSIAH	S+ Circuit
	Doc. Description: City + County of the	1.
	Ethics Gamissian Louby of Annual	Report Form
NAISK	Signature & Massel	11/29/17
	NOTARY CERTIFICATION	Date





DADT II OPPVICT

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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HONOLULU ETHICS COMMISSION RECEIVED

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN -8 P4:25

	TELEPHONE
	808-524-8563
	FAX
	808-524-8565
	EMAIL
	EMAIL leachong & tpl.orc
(State)	\ / -
	96813
u are employed by a business entity that has been retained to lobby)	TELEPHONE
P.O Box)	FAX
	EMAIL
	i i i i i i i i i i i i i i i i i i i
(State)	(Zip Code)
	u are employed by a business entity that has been retained to lobby)

PART II ORGANIZATION		<u> </u>
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE
The Trust for Public	Land	808-524-8560
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
1003 Bishop St., Suit	L 740	808-524-8565
1005 013/10/5 01. , 001.1	C 770	EMAIL
		lea. hong @ +pl. org
(City) Honolulu	(State)	(Zip Code)
Honolula	HI	96813

Preparation & Distribution Amount		
of Lobbying Materials	Media Advertising	Amount
Entertainment & Events Amount	Other	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPEN YOU RECEIVED FOR TH	-		NS AND MEMBERSHIP FEES	
Fees		Amount		
Compensation \$187.50		Amount		
Contributions		Amount		
Membership Fees	ership Fees Amount			
☐ Check here if additional sheets	s are attached	□ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Welfare		□Tourism	
			☐Specific Legislation:	
□Transportation	□Zoning & Planning	g	Bill No(Year) Reso No(Year) Admin. Rule No Dept	
⊠Other (indicate below): Clean Wa	iter & Natural La	nds Fund		
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
1. Clean Water & Natural Land and process	ds Fund projects	4.		
2.	· · ·	5.		
3.		☐ Check here	e if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing st and correct. La Han LOBBYIST SIGNATURE 1 4 2018 DATE	atements are true	= , " 1.	y of JANWAY , JANUARY S. PANINISTER OF HS IS-135 A SINGLE OF HAMINISTER	

JURAT WITH AFFIANT STATEMENT

State of Hawaii	
County of Honolniw ss.	
County of Honololw ss.	
Judicial Circuit	
See attached document (Notary to cross	s out lines 1-8 below.)
☐ See statement below (Lines 1–8 to be c	completed only by document signer[s].)
1	
2	
3	
4	
5	
6	
_	
1	
8	
NA	N/A
Signature of Signer No. 1	Signature of Signer No. 2
Document Description:	Subscribed and sworn to (or affirmed) before me
Annual Report	this day of January, 20 lg,
	by
JAN 0 4 2018 Document Date:	. If
1	(1) Len Hory Name of Signer
No. Pages:	-
	and N (♣
	(2) Name of Signer.
AN CANE	grelgy 1AN 0 4 2018
S. PANERO TARA CO TARA CO T	Notary's Signature Date
OBLIC A	Sheila S. Panergo
	Printed Name of Notary
William William	

Place Notary Seal or Stamp Above



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768
Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		· ·		
NAME (Last) (First) (Middle	9)			TELEPHONE
Hudson, Jennifer	•			503-708-9714
MAILING ADDRESS (Street	et)			FAX
91-056 Hanua Street	•			
				EMAIL
(City)	1 (64	oto)	· · · · · · · · · · · · · · · · · · ·	jhudson@schn.com
(City) Kapolei	(State)		(Zip Code) 96707	
LOBBYIST FIRM/EMPLOY	ER (Fill in only if you are en	nployed by a busines	s entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. a	and Street or P.O I	Box)		FAX
				EMAIL
(City)	(Sta	ate)		(Zip Code)
PART II ORGANIZA				
NAME OF ORGANIZATION		R (Do not a	bbreviate)	TELEPHONE
Schnitzer Steel Hawaii Corp/				503-708-9714
MAILING ADDRESS (No. a	ind Street or P.O E	Box)		FAX
91-056 Hanua Street				EMAIL
(City) Kapolei	(Stat	te)		(Zip Code) 96707
				190707
PART III EXPENDIT	URES, BY T	YPE		
Political Contributions	Amount	·	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount		Media Advertising	Amount
Entertainment & Events	Amount		Other	
			TOTAL O	

PART IV FEES COMPEN	ISATION CON	TDIBLITION	NS AND MEMBERSHIP FEES
YOU RECEIVED FOR TH	E PURPOSE C	F LOBBYII	NG
Fees		Amount	
Compensation (C- IIII E)*		Amount \$	1,200.00
Contributions		Amount	
Membership Fees Amount			
☐ Check here if additional sheets	☐ Check here if additional sheets are attached ☐ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
⊠Business & Economic Development	□Community Servi		□Customer Services
□Culture & Arts	□Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare		□Tourism
□Transportation	□Zoning & Plannin	g	□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO
1. None. 9 1.17.18		4.	
2.		5.	
3.		☐ Check here	e if additional sheets are attached
PART VII LOBBYIST CER	RTIFICATION		
I hereby certify that the foregoing sta and correct.	atements are true	_	of sworn to before me
1-9-18 DATE		My commission	FFICIAL AUTHORIZED TO ADMINISTER OATHS O EXPIRES: OFFICIAL STAMP KARMA JOY MCDOWELL NOTARY PUBLIC-OREGON COMMISSION NO. 963032 MY COMMISSION EXPIRES JUNE 12, 2021



HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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HONOLULU ETHICS COMMISSION RECEIVED

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN -9 A8 56

PART I LOBBYIST				
NAME (Last) (First) (Middle	9)			TELEPHONE
Hughes, Brian				202-794-7387
MAILING ADDRESS (Street	et)			FAX
615 Piikoi Street, Suite 402				EMAIL
				bhughes@uber.com
(City) Honolulu		(State) HI		(Zip Code)
				96814
LOBBYIST FIRM/EMPLOY	ER (Fill in only if)	you are employed by a busine	ess entity that has been retained to lobby)	TELEPHONE
Uber Technologies, inc				202-794-7387
MAILING ADDRESS (No. 8	and Street or	P.O Box)		FAX
1455 Market Street, 4th Floor				
				EMAIL
(City)		(State) CA		(Zip Code)
(City) San Francisco	CA		94103	
PART II ORGANIZA				
NAME OF ORGANIZATION	N YOU LOBI	BY FOR (Do not a	abbreviate)	TELEPHONE
Uber Technologies, Inc/				202-794-7387
MAILING ADDRESS (No. 8	and Street or	P.O Box)		FAX
1455 Market Street, 4th Floor				
				EMAIL
(City)		(State) CA		(Zip Code)
(City) San Francisco		CA		94103
PART III EXPENDIT		BY TYPE		
Political Contributions	Amount		Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount		Media Advertising	Amount
Entertainment & Events	Amount		Other	
			TOTAL 0.00	

PART IV FEES, COMP YOU RECEIVED FOR	ENSATION, COL	NTRIBUTION OF LOBBYIN	NS AND MEMBERSHIP FEES
Fees		Amount	
Compensation		Amount	
Contributions		Amount	
Membership Fees Amount			
☐ Check here if additional sh	☐ Check here if additional sheets are attached		
PART V DESCRIPTION	N OF SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Ser	vices	□Customer Services
Culture & Arts	□Housing		☐Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, S	Safety & Welfare	□Tourism
□Transportation	□Zoning & Plann	ing	□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept
PART VI POLICY MAK	ING PROCESS	DECISIONS	YOU SOUGHT TO
INFLUENCE AND OUT		DECISIONS	100 900dH1 10
1. _{N/A}		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST C	ERTIFICATION		
I hereby certify that the foregoin and correct. LOBBYIST SIGNATURE (/3/18) DATE	g statements are true	This 3ED da	ay of January, 2018. RUMMANN OFFICIAL AUTHORIZED TO ADMINISTER OATHS On expires:

Rev. 12/2017

Deadline: January 10th of Each Year NOTE: This is a public document

KATHERINE MASON
NOTARY PUBLIC-STATE OF NEW YORK
NO 01MA6336989
QUALIFIED IN NEW YORK COUNTY
MY COMMISSION EXPIRES 01 26 2020



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Imanaka, Mitchell A.		521-5500
MAILING ADDRESS (Street) 745 Fort Street Mall, 17th Floor		FAX 541-9050
·		EMAIL mimanaka@imanaka-asato.com
(City) Honolulu	(State) HI	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill	in only if you are employed by a business entity that has been retained to lobby)	TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and Str 745 Fort Street Mall, 17th Floor	reet or P.O Box)	FAX
,		EMAIL
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZA	ATION	1.71
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Avalon Development Compan	у	587-7773
MAILING ADDRESS (No. a 800 Bethel Street, Suite 501	nd Street or P.O Box)	FAX
		EMAIL
(City) Honolulu	(State) HI	(Zip Code) 96813

Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL N/A	-

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount		
Compensation		Amount	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
Contributions		Amount	-	
Membership Fees		Amount		
☐ Check here if additional sheets	are attached	⊠ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi		☐Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism	
□Transportation	□Zoning & Planning		□ Specific Legislation: Bill No(Year) 2017 Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. N/A		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DATE		Subscribed and sworn to before me This May of January, 2018 By: Charmaine Ross NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS IS CHARMAIN, 2018 My commission expires: July 25, 2021		



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
losua, Michael L.		521-5500
MAILING ADDRESS (Street)		FAX 541-9050
745 Fort Street Mall, 17th Floor		541-9050
		EMAIL
		miosua@imanaka-asato.com
(City) Honolulu	(State) HI	(Zip Code)
		96813
LOBBYIST FIRM/EMPLOYER (Fill in anly if)	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
745 Fort Street Mall, 17th Floor		
		EMAIL
(City)	(State)	(Zip Code)
Honolulu	HI	96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TELEPHONE		
Avalon Development Company 587-7773		587-7773
MAILING ADDRESS (No. and Street or P.O Box) 800 Bethel Street, Suite 501		FAX
		EMAIL
(City) Honolulu	(State)	(Zip Code) 96813

Political Contributions see https://data.hawaii.gov/	Amount NIA MI 4 12/16		Amount
Preparation & Distribution of Lobbying Materials	Amount	& Beverages Media Advertising	Amount
Entertainment & Events	Amount	Other	
100000000000000000000000000000000000000		TOTAL	

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THICS COMMISSION RECEIVED BY 28-18-

PART IV FEES, COMPE YOU RECEIVED FOR TO	NSATION, CON HE PURPOSE O	TRIBUTION F LOBBYII	NS AND MEMBERSHIP FEES
Fees		Amount \$13,000.00	
Compensation		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional shee	ts are attached	□ n/a	
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation	⊠ Zoning & Planning		Bill No. 15, 58, 59 (Year) 2017 Reso No(Year) Admin. Rule No Dept
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO
1. Bills are still pending.		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CE	RTIFICATION	-	
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE V8/2018 DATE		This da	OFFICIAL AUTHORIZED TO ADMINISTER OATHS 2938, ANNUA DEPORT



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
losua, Michael L.		521-5500
MAILING ADDRESS (Street)		FAX 541-9050
745 Fort Street Mall, 17th Floor		541-9050
		EMAIL
		miosua@imanaka-asato.com
(City) Honolulu	(State) HI	(Zip Code)
		96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX
745 Fort Street Mall, 17th Floor		
		EMAIL
(City) Honolulu	(State)	(Zip Code)
Fioriolala	П	96813

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Haseko Development, Inc. /		689-7772
MAILING ADDRESS (No. and Street or P.O Box) 91-1001 Kaimalie Street, Suite 205		FAX
		EMAIL dlum@haseko.com
(City) Ewa Beach	(State)	(Zip Code) 96706

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL -0-	

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PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	are attached	⊠ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
□Transportation	□Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. _{N/A}		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 1/8/2018 DATE		Subscribed and sworn to before me This Stn day of January, 2019. By: Charmaine Ross Charmaine Ross NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS 1St Circuit, 2pgs, Annual Pepovt My commission expires: July 25, 2021		



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817.

TEL: (808) 768-9242 FAX: (808) 768-7768 Email athics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PARTILOBBYIST					
NAME (Last) (First) (Middle)			TELEPHONE		
Iosua, Michael L.			521-5500		
MAILING ADDRESS (Street)			FAX 541-9050		
745 Fort Street Mall, 17th Floor					
				EMAIL	
100		101		miosua@imanal	ka-asato.com
(City) Honolulu		(State) HI		(Zip Code)	
LOBBYIST FIRM/EMPLOY	ER Æ			96813 TELEPHONE	
Imanaka Asato, LLLC	Lt C (rm in only ir)	ou are employed by a busine	as entity that has been retained to lobby)	521-9500	
MAILING ADDRESS (No. a	and Chanast an	D O Bowl			
745 Fort Street Mail, 17th Floor		P.U BOX)		FAX	
1745 FOR Street Mail, 17th Floor	/1			EMAIL	
				CIVITAL.	
(City) Honolulu		(State)		(Zip Code)	
Honolulu		HI		96813	
PART II ORGANIZA					
NAME OF ORGANIZATION	YOU LOBE	BY FOR (Do not a	bbreviate)	TELEPHONE	
Mana`olana Partners, LLC				310-806-4200	
MAILING ADDRESS (No. a		P.O Box)	,	FAX	
11111 Santa Monica Blvd., Su	ite 2250				
				EMAIL	
(Cihi)		(Ctate)		(7:- C-4-)	
(City) Los Angeles		(State) CA		(Zip Code) 90025	
				90025	
PART III EXPENDIT	URES. E	Y TYPE			
Political Contributions		11A m3 3/22/08	Receptions, Meals, Food	Amount	
	apps/campa	ignspending.	& Beverages		
Preparation & Distribution	Amount		Media Advertising	Amount	
of Lobbying Materials Entertainment & Events	Amount Other				
Cinditalilitett & Events	Aniount		Other		_
			TOTAL	C	H
					<u> </u>
				5	N PS

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PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING			
Fees		Amount \$7,000.00	
Compensation		Amount	
Contributions		Amount	
Membership Fees		Amount	* 11120K
☐ Check here if additional sheets	are attached	□ n/a	2
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation	⊠Zoning & Planning		Bill No(Year)
□Other (indicate below):			
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO
1. Passage of Resolution 17-221, adop	oted 9/06/17	4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 3 70 8 DATE		Subscribed and sworn to before me This Sh day of Vanuary, 2010. By: Charmaine Ross Charmaine Ross NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS LST CARCUIT, 2023, Annual Report My commission expires: July 25, 2021	



HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768
Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
losua, Michael L.		521-5500
MAILING ADDRESS (Street)		FAX 541-9050
745 Fort Street Mall, 17th Floor		541-9050
		EMAIL
		miosua@imanaka-asato.com
(City) Honolulu	(State) Hi	(Zip Code)
		96813
LOBBYIST FIRM/EMPLOYER (Fill in anly if yo	u are employed by a business entity that has been retained to lebby)	TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
745 Fort Street Mall, 17th Floor		
	EMAIL	
	(State) HI	
(City) Honolulu	(Zip Code)	
		96813

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE		
PACREP, LLC		(310) 500-2955		
MAILING ADDRESS (No. and Street or P.O Box) 10880 Wilshire Blvd., Suite 2222		FAX		
		EMAIL		
(City) Los Angeles	(State) _{CA}	(Zip Code) 90024		

PART III EXPENDITURES, BY TYPE					
Political Contributions see https://data.hawaii.gov/	Amount NIA NG 4/17/19 apps/campaignspending	Receptions, Meals, Food & Beverages	Amount		
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount		
Entertainment & Events	Amount	Other			
		TOTAL -0-			

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PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING							
Fees		Amount \$14,400.00					
Compensation		Amount					
Contributions		Amount					
Membership Fees		Amount					
☐ Check here if additional sheets are attached		□ n/a					
PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED							
☐Business & Economic Development	□Community Services		□Customer Services				
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability				
□Parks & Recreation	□Public Health, Safety & Welfare		□Tourism				
□Transportation	⊠ Zoning & Planning		Bill No. 62 (Year) 2017 Reso No. 54 (Year) 2016 Admin. Rule No				
Other (indicate below):							
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO				
1. Revisions to Resolution 16-54		4.					
2. Bill 62 approved by Mayor on 9/11/17		5.					
3.		☐ Check here if additional sheets are attached					
PART VII LOBBYIST CERTIFICATION							
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 1/8/2018 DATE		Subscribed and sworn to before me This Sh day of Vanuary, 2016. By: Charmaine Ross (WMWWW) NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS IST CIVILITY, 2013. My commission expires: July 25, 2021					





925 DILLINGHAM BOULEVARD, STE 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: athics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE	
losua, Michael L.		521-5500
MAILING ADDRESS (Street)	10116-50MH-10	FAX 541-9050
745 Fort Street Mall, 17th Floor		541-9050
		EMAIL
		miosua@imanaka-asato.com
(City) Honolulu	(State) Hi	(Zip Code)
		96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	are employed by a business entity that has been retained to lobby)	TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX
745 Fort Street Mall, 17th Floor		
		EMAIL
(City) Honolulu	(State)	(Zip Code)
		96813

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE		
Verizon Communications		925-279-6209		
MAILING ADDRESS (No 15505 Sand Canyon Avenu		FAX		
		EMAIL		
(City) Irvine	(State) CA	(Zip Code) 92618		

PART III EXPENDIT	URES, BY TYPE			
Political Contributions see https://data.hawaii.gov/	Amount NIA INT 31 WAS apps/campaighspending	Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount	
Entertainment & Events	Amount	Other		m
		TOTAL -0-	- 68	HIC

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PART IV FEES, COMPEN YOU RECEIVED FOR TH	ISATION, CON E PURPOSE O	TRIBUTION F LOBBYII	NS AND MEMBERSHIP FEES
Fees		Amount \$6,000.00	
Compensation		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sheets	are attached	□ n/a	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	□Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation	⊠ Zoning & Planning		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO
1. Passage of House Bill 625, measure	deferred	4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 1/8/2018 DATE		Subscribed and sworn to before me This Standard of Anuay, 2018. By: Charmaine Ross Manual Ross NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: July 25, 2021	

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TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)	TELEPHONE		
Iriarte, Peter T.		808-841-0491	
MAILING ADDRESS (Street)		FAX 808-847-4782	
2251 North School Street		EMAIL masonplaster@hotmail.com	
(City) Honolulu	(State) Hawauu	(Zip Code) 85819	
LOBBYIST FIRM/EMPLOYER (ill in only if you are employed by a business entity that has been retained to lobby)	TELEPHONE	
MAILING ADDRESS (No. and S	Street or P.O Box)	FAX	
		EMAIL	
(City)	(State)	(Zip Code)	

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
Masons' Union, Local 630		808-841-0491
MAILING ADDRESS (No. and	d Street or P.O Box)	FAX 808-847-4782
2251 North School Street		
		EMAIL
		masonplaster@hotmail.com
(City) Honolulu	(State) Hawaii	(Zip Code)
Honolulu	Hawaii	96819

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount \$.00	Receptions, Meals, Food & Beverages	Amount \$.00
Preparation & Distribution of Lobbying Materials	Amount \$.00	Media Advertising	Amount \$.00
Entertainment & Events	Amount \$.00	Other	
		TOTAL \$.00	

Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional s	heets are attached	⊠ n/a		
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Serv	ices	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	afety & Welfare	□Tourism	
□Transportation	□Zoning & Plannir	ng	Bill No(Year) Reso No(Year) Admin. Rule No Dept	
☑Other (indicate below): No:	ne (From October	c 2017 to	December 2017)	
PART VI POLICY MAI		ECISIONS	YOU SOUGHT TO	
1. _{N/A}		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
	CERTIFICATION			
PART VII LOBBYIST	I hereby certify that the foregoing statements are true and correct.		nd sworn to before me	
I hereby certify that the foregoi	ing statements are true		A	
I hereby certify that the foregoi	ing statements are true		T	

Document Date: 01 09 20[7 # Pages: 3	шинш
Notary Name: TERRI LYNN K.K. TANAKA First Circuit Doc. Description: Annual Report	
Notary Signature Date	
Notary Signature Date	





HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768
Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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041-12-18

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST					
NAME (Last) (First) (Middle)				TELEPHONE	
saacs, Jonathan				503.757.5721	
MAILING ADDRESS (Street					
500 SE Morrison Ave.				EMAIL	
= = = = = = = = = = = = = = = = = = = =				jisaacs@uber.com	
100 L		(State)		(Zip Code)	
(City) Portland		(State) OR		97204	
LOBBYIST FIRM/EMPLOYE	R (Fill in only if you	I are employed by a busine	ess entity that has been retained to lobby)	TELEPHONE	
Uber Technologies, Inc				202-794-7387	
MAILING ADDRESS (No. a	nd Street or I	P.O Box)		FAX	
1455 Market Street, 4th Floor				EMAIL	
1400 Marker on corl				EWAIL	
		(State) CA		(Zip Code)	
(City) San Francisco		CA CA		94103	
PART II ORGANIZA	TION		191	TELEBIIONE	-
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not	abbreviate)	TELEPHONE	
Uber Technologies, Inc				202-794-7387	
MAILING ADDRESS (No. a	nd Street or I	P.O Box)		FAX	
1455 Market Street, 4th Floor				EMAIL	
1400 (11011101 - 11 - 17					
		(State) CA		(Zip Code)	
(City) San Francisco		(Clare) CA		94103	
PART III EXPENDIT	URES, B	YTYPE			,
Political Contributions	Amount /		Receptions, Meals, Food Amount		
7)	Ø		& Beverages Media Advertising	Amount	N
Preparation & Distribution	Amount	•	Media Verginaria		0
of Lobbying Materials Entertainment & Events	Amount	1	Other		
Cufeiraniment or Cheura		Ø			
	/		TOTAL 0.00		

Rev. 12/2017

Fees		F LOBBYING Amount	
Compensation 123.08	To the second	Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here If additional	sheets are attached	□ n/a	
PART V DESCRIPTION	ON OF SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic	☐Community Servi		□Customer Services
Development □Culture & Arts	□Housing		☐Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	afety & Welfare	□Tourism
			□Specific Legislation:
⊠ Transportation	□Zoning & Plannin	ng	Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.
☑Other (indicate below):			
PART VI POLICY MA		ECISIONS	YOU SOUGHT TO
1. Vehicle for Hire trade dress.		4.	
2.		5.	
3.		☐ Check he	re if additional sheets are attached
PART VII LOBBYIST	CERTIFICATION		
I hereby certify that the foreg and correct.			ay of January
LOBBYIST SIGNATURE 1/8/18 DATE		My commissi	OFFICIAL AUTHORIZED TO ADMINISTER OATHS ION expires: ON 16 2020 BRYAN NOTARY F

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CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

31.12.18

Name	Ito /	Mihoko /	E.	
(Print)	Last	First	Middle	
Business Address		1400, Honolulu, HI 96813 State, Zip Code)	Phone 808-539	-0842
Email Address:	mito@awlaw.com			
State name and add	dress of organization y	ou lobbied for.		
Wyndham V 6277 Sea H Orlando, FL				
	received as a lobbyist lobbying activities.	representing contributions,	, membership fees an	nd other
\$0			18	
State total amount	expended for lobbying	g by lobbyist.	JAN 1	HON HICS C REC
\$0			10 P	EIVED OMMIS OLUCU
List results of the l	egislation you sought	to influence.	7:03	NOIS
N/A	MILITARIA R. SO	Doc. Date: DEC 2 Name: Uilani R. S Doc. Description: Q		st Circuit Hondulu
Other information.	202.78	Witamiss	Sura DEC 2	2017 Date
None	TE C	Signature NOTAR	CERTIFICATION	Date
I hereby certify that are true and correct	t the foregoing statem	ents Subscribed and sw This July day	of pulmber.	20/1/11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/
Mul	oh V	Notary or any offi	icial authorized to admin	istenceths. 2080 *
(Sign	ature)		77	UBU

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOR RECORDS



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)				TELEPHONE
Kaakua, Laura Hokunani Edmur	nds			8085248562
MAILING ADDRESS (Street) The Trust for Public Land, 1003		eet, Suite 740		FAX 8085248565
	·			EMAIL laura.kaakua@tpl.org
(City) _{Honolulu}	ty) Honolulu (State) Hawaii			(Zip Code) 96813
LOBBYIST FIRM/EMPLOYE	R (Fill in only if yo	ou are employed by a busines	ss entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. an	d Street or	P.O Box)		FAX
				EMAIL
(City)		(State)		(Zip Code)
PART II ORGANIZAT	ΓΙΟΝ			
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not a	bbreviate)	TELEPHONE
The Trust for Public Land /				8085248562
MAILING ADDRESS (No. and 1003 Bishop Street, Suite 740	d Street or	P.O Box)		FAX 8085248565
				EMAIL laura.kaakua@tpl.org
(City) Honolulu		(State) Hawaii		(Zip Code) 96813
PART III EXPENDITU	JRES, E	BY TYPE		
C	Amount		Receptions, Meals, Food & Beverages	Amount 0
of Lobbying Materials	Amount		Media Advertising	Amount 0
Entertainment & Events	Amount		Other ₀	
			TOTAL \$0	

Fees		Amount 0	
Compensation		Amount 0	
Contributions		Amount 0	
Membership Fees		Amount 0	
☐ Check here if additional sheets are attached		⊠ n/a	
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic Development	□Community Serv	ices	□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
			☐Specific Legislation:
□Transportation	□Zoning & Plannir	ng	Bill No(Year)Reso No(Year)Admin. Rule No
	an wilter & Notriva		nd to Mulis
PART VI POLICY MAP	(ING PROCESS D	ECISIONS	nd to Mulis
PART VI POLICY MAP INFLUENCE AND OUT 1. Clean Water and Natural Lands	(ING PROCESS D	ECISIONS	nd to Mulis
PART VI POLICY MAP INFLUENCE AND OU ¹ . Clean Water and Natural Lands 2.	(ING PROCESS D	ECISIONS	nd to Mulis
PART VI POLICY MAP INFLUENCE AND OU 1. Clean Water and Natural Lands 2. 3.	(ING PROCESS D	4.	nd to Mulis
PART VI POLICY MAP INFLUENCE AND OUT 1. Clean Water and Natural Lands 2.	(ING PROCESS D TCOME Fund projects	4.	YOU SOUGHT TO
PART VI POLICY MAP INFLUENCE AND OU ¹ . Clean Water and Natural Lands 2.	CERTIFICATION ag statements are true	4. 5. Check her	YOU SOUGHT TO The if additional sheets are attached and sworn to before me any of UANUARY . 2018.
PART VI POLICY MAP INFLUENCE AND OU 1. Clean Water and Natural Lands 2. 3. PART VII LOBBYIST Of the Proposition of the Propos	(ING PROCESS DETCOME Fund projects CERTIFICATION	5. Check her	YOU SOUGHT TO The if additional sheets are attached The if if additional sheets are attached The if



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN -3 P2:03

		(Typo of Time	Oldary,	
PART I LOBBYIST				
NAME (Last) (First) (Middle) /		^	TELEPHONE
Kahele MAILING ADDRESS (Stree	Helvi	n No	on choy	3814658
MAILING ADDRESS (Stree	t)	7		FAX 6716901
94-497 4 Ke	- 5T			ÊMAII .
				iw mel@yahoo, (Zip Gode)
(City)		(State)		(Zip Code)
Wai Pahu LOBBYIST FIRM/EMPLOY		Hi	8	TELEPHONE
			iness entity that has been retained to lobby)	
Trus workers MAILING ADDRESS (No. a	STab	Fund		381 4658
				FAX 6716901
94-497 UK	10 9	F		EMAIL
		,		(Zip Code)
(City)		(State)		(Zip Code)
waipahu		HI		96797
PART II ORGANIZA	TION			7 7 11 54 54 11 11 11 11 11
NAME OF ORGANIZATION	YOU LOB	BY FOR (Do not	t abbreviate)	TELEPHONE
thon worker	Staf	Eund.		game
Trun Worker MAILING ADDRESS (No. a	ınd Street o	r P.O Box)		FAX / /
Same	as a	above		
) = 0,000				EMAIL , ,
(City)		(State)	all of the	(Zip Code) _{(/}
PART III EXPENDIT		BY TYPE		
	Amount	304	Receptions, Meals, Food & Beverages	100
Preparation & Distribution	Amount		Media Advertising	Amount
of Lobbying Materials Entertainment & Events	Amount		Other	
Entertainment & Events	Amount		Other	8106/2/1
			TOTAL	

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PART IV FEES, COMPEI YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES
Fees	0	Amount	0
Compensation	D	Amount	0
Contributions		Amount	
Membership Fees O Amount O			0
☐ Check here if additional sheet	s are attached	□ n/a	
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	YOU LOBBIED
Business & Economic Development	Community Servi	ces	Customer Services
Culture & Arts	Housing		Public Works, Infrastructure & Sustainability
AParks & Recreation	Public Health, Sa	fety & Welfare	Tourism
			☐Specific Legislation:
Transportation	Zoning & Planning	g	Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):	1	. –	
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO
1. Mass Transit			
2. Housing		5.	
3.	19	☐ Check here if additional sheets are attached	
PART VII LOBBYIST CE	RTIFICATION		
I hereby certify that the foregoing s		Subscribed ar	nd sworn to before me
and correct.		This 2rd day of January, 2018.	
Mu Clas	her	By: NOTARY OF ANY	FICIAL AUTHORIZED TO ADMINISTER OATHS
1/2/2018 DATE	DATE My commission expires: 9 02 20 See attached Nutary		
		ı	Document.

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	1
STATE OF HAWAII	}
COUNTY OF HONOLULU	} SS. }
MEWIN YC KAHELE, to IT	20 6 before me personally appeared he known to be the person described in and who and acknowledgment thathe executed the same as
Witness my hand and seal. NOTARY PUBLIC (SEAL) Comm. No. 12-295	EMILY MORTON My Commission expires: 09/02/2020
Doc Date: 12 16 Notary Name: EMILY MORTON Doc Description: Annual Report: Lold Report Emily Morton	No. Pages: 2 St Circuit OI/02/18 Date No. Pages: 2 Circuit Circuit Comm. No. 12-295 Date

1

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KAI, GARY K.		808-532-2244
MAILING ADDRESS (Street)		FAX
1003 BISHOP STREET, SUITE 2630		EMAIL HIBR@AOL.COM
(City) HONOLULU	(State) HI	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
HAWAII BUSINESS ROUNDTABLE		808-532-2244
MAILING ADDRESS (No. and Street or F	P.O Box)	FAX
1003 BISHOP STREET, SUITE 2630		
		EMAIL HIBR@AOL.COM
(City) HONOLULU	(State) HI	(Zip Code) 96813

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION Y	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
HAWAII BUSINESS ROUNDTAE	BLE /	808-532-2244
MAILING ADDRESS (No. and	Street or P.O Box)	FAX
1003 BISHOP STREET, SUITE	2630	EMAIL HIBR@AOL.COM
(City) HONOLULU	(State) HI	(Zip Code) 96813

PART III EXPENDI	TURES, BY TYPE		
Political Contributions	Amount \$0	Receptions, Meals, Food & Beverages	Amount \$0
Preparation & Distribution of Lobbying Materials	Amount \$0	Media Advertising	Amount \$0
Entertainment & Events	Amount \$0	Other	
		TOTAL \$0	

Fees		Amount \$0		
Compensation		Amount \$0		
Contributions		Amount \$0		
Membership Fees		Amount \$0		
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTION	ON OF SUBJECTS	ON WHICH	YOU LOBBIED	
☑Business & Economic Development	□Community Serv	ices	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	☑Public Health, Sa	afety & Welfare	□Tourism	
☑Transportation	□Zoning & Planning		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
PART VI POLICY MA		ECISIONS	YOU SOUGHT TO	
PART VI POLICY MA		DECISIONS	YOU SOUGHT TO	
PART VI POLICY MA NFLUENCE AND OU			YOU SOUGHT TO	
PART VI POLICY MAINFLUENCE AND OU		5.	YOU SOUGHT TO e if additional sheets are attached	
PART VI POLICY MAINFLUENCE AND OL	JTCOME	5.		
PART VI POLICY MAINFLUENCE AND OUT. 2. 3. PART VII LOBBYIST I hereby certify that the forego	CERTIFICATION	4. 5. Check her	e if additional sheets are attached	
PART VI POLICY MAINFLUENCE AND OUT. 1. 2. 3. PART VII LOBBYIST I hereby certify that the foregode and correct. LOBBYIST SIGNATURE	CERTIFICATION Ding statements are true	Subscribed ar This 9+10 da By: Diane	e if additional sheets are attached and sworn to before me	
PART VI POLICY MAINFLUENCE AND OL 1. 2. 3. PART VII LOBBYIST I hereby certify that the foregonand correct. LOBBYIST SIGNATURE DATE	CERTIFICATION Ding statements are true	Subscribed ar This 9+10 da By: Diane	e if additional sheets are attached and sworn to before me ay of January, 2018	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KAKU, BEVERLY J.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		
		EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code)
HONOLOLO	HAVVAII	96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or	P.O Box)	FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		
1		EMAIL
		bkaku@castlecooke.com
(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96817

PART II ORGANIZAT	ON	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
CASTLE & COOKE HOMES HA	WAII, INC.	(808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510	680 IWILEI ROAD, SUITE 510	
		EMAIL
(City) HONOLULU (State) HAWAII		(Zip Code)
HONOLULU	FIAVVAII	96817

Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other _{0.00}	
		TOTAL 0.00	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES
Fees		Amount	
Compensation Of		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sheets	are attached	⊠ n/a	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	⊠Housing		☑ Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation ☑Zoning & Planning		g	□ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.
□Other (indicate below):			VOLLOCALIZATION TO
PART VI POLICY MAKING INFLUENCE AND OUTCO		ECISIONS	YOU SOUGHT TO
		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CEF	RTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION Kyoko Patoc Doc. Description: Doc. Date		This day By: WYOKO PA NOTARY OR ANY My commission June 14, 202	O No. 96-313



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR PER COMMISSION RECEIVED

91.12.18

18 JAN -9 P3:01

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KAKU, BEVERLY J.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL bkaku@castlecooke.com
(City) HONOLULU (State) HAWAII		(Zip Code) 96817

PART II ORGANIZAT	ION	No.
NAME OF ORGANIZATION Y	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
CASTLE & COOKE PROPERT	IES, INC.	(808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL
(City)	(State) HAWAII	(Zip Code) 96817

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other _{0.00}	
		TOTAL 0.00	

Deadline: January 10th of Each Year NOTE: This is a public document

			NS AND MEMBERSHIP FEES
YOU RECEIVED FOR THE PURPOSE OF Fees		Amount	NG
Compensation		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sh	eets are attached	⊠ n/a	
PART V DESCRIPTION	N OF SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic	□Community Servi		□Customer Services
Development ☐Culture & Arts	⊠Housing		☑ Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation ⊠Zoning & Planning		g	Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAK		ECISIONS	YOU SOUGHT TO
1. _{N/A}	I OOME	4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST (CERTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION.		This da	0 No. 96-313
Doc. Description: White Page 12/2017 A Property Signature	Paggs: Deadline: Januar Date NOTE: This is a	y 10 th of Each Y public docume	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OF THE CITY OF THE RECEIVED

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18 JAN -9 P3:02

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KAKU, BEVERLY J.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		
		EMAIL
(City) HONOLULU	(City) HONOLULU (State) HAWAII	
LOBBYIST FIRM/EMPLOYER (Fill in only If you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		, ,
		EMAIL
		bkaku@castlecooke.com
(City) HONOLULU (State) HAWAII		(Zip Code)
HONOLULU	ПАУУАП	96817

ION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			
CASTLE & COOKE, INC.			
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510			
		(City) HONOLULU (State) HAWAII	
			d Street or P.O Box)

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other 0.00	
		TOTAL 0.00	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees RI		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	are attached	⊠ n/a		
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	☐ Customer Services	
□Culture & Arts	⊠Housing		☑ Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
	8		□Specific Legislation:	
□Transportation	☑Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. _{N/A}		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE MOTARY CERTIFICATION: NO. 96.313		This 5 da		

Rev. 12/2017 #Pages: Deadline: January 10th of Each Year Notary Signature

Rev. 12/2017 Deadline: January 10th of Each Year NoTE: This is a public document



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TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACEHTOM DEFINE USE ONLY ETHICS COMMISSION RECEIVED

18 JAN -8 P4:52

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

	(Type or Print Clearly)	
PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KELLY STEPHEN H.		(808) 674-3289
MAILING ADDRESS (Street)		FAX
1001 Kamokila Boulevard, Suite 25	0	
		EMAIL stevek@kapolei.com
(City) Kapolei	(State) Hawaii	(Zip Code)
·		96707
OBBYIST FIRM/EMPLOYER (FIII	in only if you are employed by a business entity that has been retained to lobby)	TELEPHONE
AINA NUI CORPORATION/JAMES CAMPBELL CORPORATION		(808 674-6674
MAILING ADDRESS (No. and Str	eet or P.O Box)	FAX
1001 Kamokila Boulevard, Suite 25	0	
		EMAIL
		stevek@kapolei.com
(City) Kapolei	(State) Hawaii	(Zip Code)
Napolei	1 lawaii	96707
PART II ORGANIZATIO	N	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
JAMES CAMPBELL CORPORATION /		(808) 674-6674
MAILING ADDRESS (No. and Str	reet or P.O Box)	FAX
	_	

PART II ORGANIZA	ATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
JAMES CAMPBELL CORPORATION /		(808) 674-6674
MAILING ADDRESS (No. and Street or P.O Box)		FAX
1001 Kamokila Boulevard, Suite 250		EMAIL
(City) Kapolei	(State) Hawaii	(Zip Code) 96707

PART III EXPENDI	TURES, BY TYPE		
Political Contributions	Amount \$4,450.00	Receptions, Meals, Food & Beverages	Amount \$0.00
Preparation & Distribution of Lobbying Materials	Amount \$0.00	Media Advertising	Amount \$0.00
Entertainment & Events	Amount \$0.00	Other	
		TOTAL \$4,450.00	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount \$0.00		
Compensation	,	Amount \$0.00		
Contributions		Amount \$0.00		
Membership Fees		Amount \$0.00		
☐ Check here if additional sheets	are attached	□ n/a		
PART V DESCRIPTION C	F SUBJECTS (ON WHICH	YOU LOBBIED	
☑Business & Economic Development	□Community Service		☐Customer Services	
Culture & Arts	⊠Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism	
⊠Transportation	⊠Zoning & Planning		⊠Specific Legislation: Bill No. 58 & 59 (Year) 2017 Reso No. (Year) Admin. Rule No. (Year) Dept.	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. Ewa Highway Impact Fee Policy		4.		
2.	,	5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This day of		
LOBBYIST SIGNATURE 1/8/18 DATE		By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires:		

STATE OF HAWAII)) SS.	
CITY AND COUNTY OF HONOLULU)	
On this 8th day of 3 appeared Stephen H. Kelly , duly sworn or affirmed, did say that such the free act and deed of such person, and if duly authorized to execute such instrument	to me personally known, we person executed the foregon applicable in the capacity shapes in the capacity shapes are shapes as the capacity sha	who, being by me bing instrument as
No. 98-33	Name: Jenny R. Okano Notary Public, State of Hav My commission expires: 1	
Document Date:1/10/2018 Jenny R. Okano Document Description: _Honolulu Ethics Report (Lobbyist Annual Report)	No. of Pages:3 First Circuit Commission - Annual	No. 98-33
Anny K Okuno Notary Signature	1/8/2018 Date	No. 98-33

NOTARY CERTIFICATION

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

 Name	Kido	C. /	Mike	
(Print)	Last	First	Middle	
Business Address		‡1400, Honolulu, HI 96813 y, State, Zip Code)	Phone 808-53	9-0428
Email Address: _	cmk@awlaw.com			-
State name and ac	ldress of organization	you lobbied for.		
	Vacation Ownership Harbor Drive _ 32821			
State total amount receipts related to	t received as a lobbyist lobbying activities.	t representing contributions	, membership fees a	and other
. \$0	, ,		च	9
\$ 0			N.	HCS RES
State total amount	t expended for lobbyin	g by lobbyist.	10	C C C C C C C C C C C C C C C C C C C
\$0			P7:02	ED HISSION LU
List results of the	legislation you sought	to influence. Doc. Date: DEC 2	1 2017 # Pages:	:_/
N/A	Julium I A. A.		y and County of H	rst Circuit
Other information		072-187 Wites COMMUSIC		2017
None	7. A.	OF HOLLING NOTARY	CERTIFICATION	Date
I hereby certify th	at the foregoing staten	nents, white the spine of the said si	worn to before me	
are true and correc	et.	STAIL HE	of Pycember	. 20_/7.
0 220		By 187 Octany off	icial authorized to admi	inister oaths
(Sign	he Vide	Mycommission expi	res: Manch 24,	2020
(Sign	nature)	Mycommission expi	res: Manch 24,	2020

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOR RECORDS



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768

Email: ethics@honolulu.gov

Website: http://www.honolulu.gov/ethics/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Kimura, Joy Y.N.		(808) 845-3238
MAILING ADDRESS (Street) 650 Iwilei Road, Suite 285		FAX (808) 845-8300
		EMAIL info@hawaiilecet.org
(City) Honolulu (State) Hawaii		(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZATION			
NAME OF ORGANIZATION	TELEPHONE		
Hawaii Laborers-Employers Cooperation and Education Trust (LECET)		(808) 845-3238	
MAILING ADDRESS (No. and Street or P.O Box) 650 Iwilei Road, Suite 285		FAX (808) 845-8300	
		EMAIL info@hawaiilecet.org	
(City) Honolulu (State) Hawaii		(Zip Code) 96817	

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other	
		TOTAL 0.00	

Rev. 12/2017 Deadline: January 10th of Each Year

PART IV FEES, COMPE YOU RECEIVED FOR TH	NSATION, CON IE PURPOSE (TRIBUTION OF LOBBYN	NS AND MEMBERSHIP FEES
Fees		Amount 0.00	
Compensation		Amount 0.00	
Contributions		Amount 0.00	
Membership Fees		Amount 0.00	
☐ Check here if additional sheet	s are attached	⊠ n/a	
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	YOU LOBBIED
☑Business & Economic Development	□Community Serv		□Customer Services
□Culture & Arts	☑Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	⊠ Public Health, Sa	afety & Welfare	□Tourism
			☐Specific Legislation:
▼Transportation ▼Zoning & Planning		g	Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAKIN	G PROCESS D	ECISIONS	YOU SOUGHT TO
INFLUENCE AND OUTCO	OME		
NONE & LOUIS		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION		
I hereby certify that the foregoing sta and correct.	atements are true	Subscribed and sworn to before me	
		This 9th day of January , 2018	
LOBBYIST SIGNATURE		BY: CHATHIA R. KAMORI CHATHIAN OF ANY OFFICIAL AUTHORIZED TO COMMING ED. SAPARONI	
January 9, 2018 DATE		My commission expires: No. 96-169	

Deadline: January 10th of Each Year

Notary Name: Cynthia R. Komori First C:

Doc. Description Hamilian Ethica Commun.

Annual Report fur Joy J.N. Kimura

i 1918

Notary Signature Date



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN 10 P1:08

PART I LOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE	
KORAVASHY DYAN K		841-5877
KOBAYASH RYAN K MAILING ADDRESS (Street)		FAX
1, 17 7		EMAIL
161 t talama St		rkobaupshi@local318.org
(City) Honolulu (State)	()	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a busine	ess entity that has been retained to lobby)	TELEPHONE
Hawaii Laborers' Union Local 368		841-5877
MAILING ADDRESS (No. and Street or P.O Box)		FAX
,		
		EMAIL
(City), Honolulu (State)		rkobayashi@loca/368.org
(City) (State)		(Zip Code)
Honolulu		96017
PART II ORGANIZATION		
	alalama da ka	TELEBLIONE
NAME OF ORGANIZATION YOU LOBBY FOR (Do not a		TELEPHONE
Hawaii Laborers' Union Local 3 MAILING ADDRESS (No. and Street or P.O Box)	68/	841-5877
MAILING ADDRESS (No. and Street or P.O Box)	Lawrence Lawrence	FAX
	Court of the state	TAAAU
11.17 Dalaina St		EMAIL
(City), (State),		Irkobayashi@local368.09 (Zip Code)
(City) Honolulu (State) Haw	$a\dot{0}$	9/8/7
1.07010011) (· · · · · · · · · · · · · · · · · ·	18011
PART III EXPENDITURES, BY TYPE		
Political Contributions Amount Receptions, Meals, Food & Beverages		Amount ϕ
Preparation & Distribution Amount of Lobbying Materials Media Advertising		Amount
Entertainment & Events Amount Other		inds. Baco.
Fig. 18 S	aben First Circuit JATOT	Notary Name: Narsi Ad Gan
	Duc. Description Saludet	

Deadline: January 10th of Each Year NOTE: This is a public document

Notiny Signature

PART IV FEES, COMPEN YOU RECEIVED FOR TH	· ·		NS AND MEMBERSHIP FEES
Fees		Amount	ϕ
Compensation		Amount	Ø
Contributions	1	Amount	Ø
Membership Fees		Amount	Ď
☐ Check here if additional sheets	are attached	□ n/a	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	☑Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism
		···	□Specific Legislation:
☐Transportation		Bill No(Year)g Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):			TO DAKE FINI
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO
1. Sought to obtain approve	al for projecto	4.	* * * * * * * * * * * * * * * * * * *
2.	voiding	5.	
Saight to obtain zoning approval for projects		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CEF	RTIFICATION	rous -	
I hereby certify that the foregoing sta and correct.	atements are true	= [,]	od sworn to before me
LOBBYIST SIGNATURE # Pages		By: William	DEFICIAL AUTHORIZED TO ADMINISTER OATHS n expires:
No. 97-171 Deadline: January 10 th of Each Year Notary Signature Date No. 97-171 No. 97-171 No. 97-171 Deadline: January 10 th of Each Year Date			



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR BANGEWISE ONLY ETHICS COMMISSION RECEIVED

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)	414	TELEPHONE
KODAMA, LAURA M.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	(City) HONOLULU (State) HAWAII	
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL Ikodama@castlecooke.com
(City) HONOLULU (State) HAWAII		(Zip Code) 96817

PART II ORGANIZAT	TION	
NAME OF ORGANIZATION CASTLE & COOKE HOMES H	YOU LOBBY FOR (Do not abbreviate) AWAII, INC. <	TELEPHONE (808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975 EMAIL
(City) HONOLULU	(State)	(Zip Code) 96817

PART III EXPENDITURES, BY TYPE			
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other 0.00	
		TOTAL 0.00	

attached SUBJECTS Community Servi Housing Public Health, Sa	ces fety & Welfare	YOU LOBBIED □ Customer Services ☑ Public Works, Infrastructure & Sustainability □ Tourism □ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.	
SUBJECTS Community Serving Housing Public Health, Sa	Amount n/a ON WHICH ces fety & Welfare	□ Customer Services ☑ Public Works, Infrastructure & Sustainability □ Tourism □ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No.	
SUBJECTS Community Serving Housing Public Health, Sa	☑ n/a ON WHICH ces fety & Welfare	□ Customer Services ☑ Public Works, Infrastructure & Sustainability □ Tourism □ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No.	
SUBJECTS Community Serving Housing Public Health, Sa	ON WHICH	□ Customer Services ☑ Public Works, Infrastructure & Sustainability □ Tourism □ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No.	
Community Servi	ces fety & Welfare	□ Customer Services ☑ Public Works, Infrastructure & Sustainability □ Tourism □ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No.	
Community Servi	ces fety & Welfare	□ Customer Services ☑ Public Works, Infrastructure & Sustainability □ Tourism □ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No.	
Public Health, Sa		Sustainability Tourism Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No.	
		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No	
oning & Plannin	g	Bill No(Year) Reso No(Year) Admin. Rule No	
ROCESS D	ECISIONS	YOU SOUGHT TO	
	4.		
1. N/A 2.		5.	
3.		☐ Check here if additional sheets are attached	
FICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION.		Subscribed and sworn to before me This day or January , 2018 By: White December 1997 KYOKO PATOC, State of Hawaii NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: June 14, 2020 No. 96-313	
	ents are true	FICATION ents are true Subscribed a This KYOKO P. NOTARY OR ANY My commissi	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

HONOLULU ETHICS COMMISSION RECEIVED

\$ 2.18.18

ANNUAL REPORT

JAN 10 P7:04

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) LA CHICA, MAE PATYUUA QUEMA		TELEPHONE
MAILING ADDRESS (Street)		FAX
800 LICHARDS ST. SMITE WI		EMAIL trish @ hiphi.org
(City) HONOLULU	(State) H1	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in only if)	rou are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or P.O Box)		FAX
		EMAIL
(City)	(State)	(Zip Code)
DART II ORCANIZATION		
PART II ORGANIZATION NAME OF ORGANIZATION YOU LOBE Hawaii Public Health Inct	TELEPHONE 5916508	
MAILING ADDRESS (No. and Street or P.O Box)		FAX
850 Michards St. Snite 201		EMAIL
(City) Honoluly	(State) M	(Zip Code) 96769 813

PART III EXPENDIT	URES, BY TYPE		
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount \$60.10	Media Advertising	Amount
Entertainment & Events	Amount	Other	
187 SURUR VO	LIST I (Ok. 1994) Charles	TOTAL \$60.10	

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Rev. 12/2017

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets are attached		<i>№ 02/13/18</i> ≱n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	☑ Public Health, Sa	fety & Welfare	□Tourism	
□Transportation	□Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
Other (indicate below): Health				
PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME				
1. Bill 70 passed		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CERTIFICATION				
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE		Subscribed and sworn to before me Thisday ofJAN_0_9_2018_, By:Clifton S. Kaneshiro NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTED CATHS My commission expires:NOTARY PUBLIC		
See attached Notary Certificate No. 65-271 Deadline: January 10 th of Each Year NOTE: This is a public document				



HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY ETHICS COMMISSION RECEIVED \$ 10.8.18

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Larson, Betty Lou		(808) 373-0356
MAILING ADDRESS (Street)		FAX
1822 Keeaumoku Street		
		EMAIL
		bettylou.larson@catholiccharities
(City) Honolulu	(State)	(Zip Code)
		96822
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
Catholic Charities Hawaii	(808) 373-0356	
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX
1822 Keeaumoku Street	808-527-4889	
		EMAIL
		tina@catholiccharitieshawaii.org
(City) Honolulu	(State)	(Zip Code)
Honolulu	111	96822

PART II ORGANIZA	ATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Catholic Charities Hawaii		(808) 527-4878	
MAILING ADDRESS (No. and Street or P.O Box) 1822 Keeaumoku Street		FAX (808) 527-4889	
		EMAIL	
(City) Honolulu	(State)	(Zip Code) 96822	

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other ₀	
		TOTAL 0	

PART IV FEES, COMPEI YOU RECEIVED FOR TH	NSATION, CON IE PURPOSE O	TRIBUTION F LOBBYN	NS AND MEMBERSHIP FEES
Fees		Amount	
Compensation		Amount \$6172	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sheets are attached		□ n/a	
PART V DESCRIPTION O	OF SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	⊠Community Servi	ces	□Customer Services
□Culture & Arts	⊠Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation	□Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO
1. Housing	JIVIE	4.	
2. Senior Services		5.	
3. Economic Justice		□ Check here if additional sheets are attached UC	
PART VII LOBBYIST CER	RTIFICATION		O NOTARY PUBLIC
I hereby certify that the foregoing statements are true		Subscribed and sworn to before me No. 18-468	
LOBBYIST SIGNATURE		By: Mul Mucher By: OF HAND NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS CELLINE ALLOWED TO ADMINISTER OATHS	
		My commission expires: 8/19/2022 Figh Circuit Commission expires: 19/10/2021 19/10/202	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN -9 P2:57

PART I LOBBYIST		The same of the sa
NAME (Last) (First) (Middle)		TELEPHONE
Lee Potar it.M.		(608) 845-3238
MAILING ADDRESS (Street) 650 Junior Koud Sunk 285		(808) 845 8300
650 JWHA KUUS, SMIC 200		EMAIL.
		into Chamarilecut, any
(City)	(State) Hawaii	(Zip Code)
itonolulu		96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you	are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or F	FAX	
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE
Hawaii Labovars - Employers	Cooperation and Education Trust P.O Box)	(808) 845-3238
MAILING ADDRESS (No. and Street or	FAX (808) 845-3238	
650 Iwilei Road, Suite 285	(000) 013 3230	
		EMAIL info Chawaii locations
(City)	(State)	(Zip Code)
itonolaly	Hawaii	40817

Political Contributions	Amount	h?	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Salara pal	Media Advertising	Amount.
Entertainment & Events	Amount	,	Other N/A	
TESTICO DE LA CONTRA PER	Ad and	William .	TOTAL 6	

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PART IV FEES, COMPEN YOU RECEIVED FOR TH			IS AND MEMBERSHIP FEES		
Fees		Amount	ø		
Compensation		Amount 2	8		
Contributions		Amount 9	1		
Membership Fees	1.	Amount 🎉			
☐ Check here if additional sheets	are attached	□ n/a			
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED		
☑Business & Economic	□Community Service		□Customer Services		
Development ☐Culture & Arts	□Housing		☑∕Fublic Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism		
		- 101	☐Specific Legislation:		
Transportation Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept			
MOther (indicate below): Construction Industry P	elated				
PART VI POLICY MAKININFLUENCE AND OUTCO		ECISIONS	YOU SOUGHT TO		
1. N/A	r and in	4. N/A	I was a Second about		
2. NA		5. N/A			
3. N/A	1)	☐ Check here if additional sheets are attached			
PART VILLORBYIST CER	RTIFICATION		LOTAD P		
I hereby certify that the foregoing statements are true		Subscribed and sworn to before me			
and correct.		This 2nd day of Junuary, 20180F HAMILLE			
LORBYIST SIGNATURE		By: JW Y. N. Ki MUM NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS			
DATE 2 8		My commission expires: 1/2-116 #Pages: 2 Notary Name: Joy Y.N. Kimura 15† Circu			
		Doc. Description: City and County of Honolulu			

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Date

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION HONOLULU LOBBYIST ANNUAL REPORT FORWES COMMISSION RECEIVED

Name Lincoln	Faye 18 FEB -5 All :53
(Print) Last	First
Business Address 206 North 2100 V (Street, City, State, Zip	Vest, Saltlakerhone (801) 325-015. O Code) Utah 84116
State name and address of organization you lab	wied for
state name and address of organization you love	iled for.
Avalon Health Care	
State total amount received as a lobbyist represe receipts related to lobbying activities.	nting contributions, membership fees and other
None -	
State total amount expended for lobbying by lob	byist.
none	
List results of the legislation you sought to influe	ence.
NIA	
Other information.	
I hereby certify that the foregoing statements	Subscribed and sworn to before me
are true and correct.	This 30th day of Junary, 20/8.
4 1 1	Notary or any official authorized to administer oaths
Mud Lamubi	
(Signature)	My commission expires: /// D4 / 20/8
(Signature)	

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
LOVVORN, CHRISTOPHER M.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE HAWAII		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
OUT WILL NOAD, SUITE STO		EMAIL clovvorn@castlecooke.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION	TELEPHONE	
CASTLE & COOKE PROPERTIES, INC./		(808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL
(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96817

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00	
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other _{0.00}		
		TOTAL 0.00	- 1	

PART IV FEES, COM YOU RECEIVED FOR			NS AND MEMBERSHIP FEES	
Fees		Amount		
Compensation	-	Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional s	heets are attached	⊠ n/a		
PART V DESCRIPTION	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
☑Business & Economic Development	□Community Serv	rices	□Customer Services	
□Culture & Arts	⊠Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, S	afety & Welfare	□Tourism	
☐Transportation ☐Zoning & Planning		ng	□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MA INFLUENCE AND OU		DECISIONS	YOU SOUGHT TO	
1. NONE & OV/cally		4.		
2.		5.		
3.		☐ Check hei	☐ Check here if additional sheets are attached	
PART VII LOBBYIST	CERTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN 5 2018 DATE NOTARY CERTIFICATION Kyoko Paloc Eirst Judicial Opening		This dia		
Rev. 12/20Notally Signature Rev. 12/20Notally Signature NOTE: This is a public document			ear	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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(Zip Code) 22102

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

	(Type or Print Clearly)	
PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
LUI-KWAN, IVAN M.	(808) 537-6100	
MAILING ADDRESS (Street)	FAX (808) 537-5434	
733 BISHOP STREET, SUITE 1900		`
		EMAIL
		iluikwan@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code)
1101102020	17,007,01	96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	TELEPHONE	
STARN O'TOOLE MARCUS & FISHER	(808) 537-6100	
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 537-5434
733 BISHOP STREET, SUITE 1900	733 BISHOP STREET, SUITE 1900	
		EMAIL
(City) HONOLULU	(State)	(Zip Code)
HONOLULU	HAWAII	96813
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBB	Y FOR (Do not abbreviate)	TELEPHONE
PARK HOTELS & RESORTS INC:		(703) 584-7979
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
1600 TYSONS BOULEVARD, 10TH FLOOF	₹	
		EMAIL

PART III EXPENDIT	TURES, BY TY	PE	
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL 0	

(State) VIRGINIA

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(City) MCLEAN

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount \$ 14,294.24		
Compensation		Amount		
Contributions		Amount		
Membership Fees	Membership Fees Amount			
☐ Check here if additional sheets	are attached	□ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi		☐Customer Services	
□Culture & Arts	□Housing		☐ Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	⊠Tourism	
			⊠Specific Legislation:	
□Transportation	⊠Zoning & Planning		Bill No. (Year) Reso No. 17-303 (Year) 2017 Admin. Rule No. Dept.	
□Other (indicate below):				
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
1. INTRODUCTION & ADOPTION OF RESO NO. 17-303		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This 10TH day of JANUARY 2018 0TAR		
LOBBYIST SIGNATURE		By: NOTARY OR ANY	OFFICIAL AUTHORIZED TO ADMINISTER OATHS *	
JANUARY 10, 2018 DATE		My commission expires:		

NOTARY CERTIFICATION STATEMENT

Document Description: City and County of Honolulu Ethics

Commission Lobbyist Annual Report for Ivan M. Lui-Kwan

(Park Hotels & Resorts Inc.)

No. of Pages: 3

Jurisdiction: First Judicial Circuit

Honolulu, Hawaii

Signature of Notary

Date of Notarization and

Certification Statement

Bernadette A. Lee

Printed Name of Notary

(Official Stamp or Seal)



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ HONOLULU

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)		TELEPHONE	
Lori Ann C. Lum		808-544-8300	
MAILING ADDRESS (Street)		FAX	
999 Bishop Street, Suite 1250		EMAIL lum@wik.com	
(City) Honolulu	(State) _{HI}	(Zip Code) 96813	
LOBBYIST FIRM/EMPLOYER (Fill)	TELEPHONE		
Watanabe Ing LLP		808-544-8300	
MAILING ADDRESS (No. and Str	eet or P.O Box)	FAX	
999 Bishop Street, Suite 1250		EMAIL Ilum@wik.com	
(City) Honolulu	(State) HI	(Zip Code) 96813	

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	TELEPHONE	
The Howard Hughes Corporati	808-591-4811	
MAILING ADDRESS (No. a	FAX	
1240 Ala Moana Blvd., Suite 2		
		EMAIL
		Todd.Apo@howardhughes.com
(City) Honolulu	(State)	(Zip Code)
Honolulu	MI MI	96814

PART III EXPENDIT	IUKES, BY ITPE		
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other N/A \ Lo \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	5
		TOTAL	

PURPOSE O	F LOBBYIN	NS AND MEMBERSHIP FEES	
Fees Amount \$1,0		9.00	
Compensation			
	Amount		
Membership Fees			
☐ Check here if additional sheets are attached			
F SUBJECTS (ON WHICH	YOU LOBBIED	
		☐Customer Services	
⊠Housing		□Public Works, Infrastructure & Sustainability	
□Public Health, Safety & Welfare		□Tourism	
⊠Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
	ECISIONS	YOU SOUGHT TO	
1. Kakaako Zoning & Housing issues			
	5.		
3.		☐ Check here if additional sheets are attached	
TIFICATION			
I hereby certify that the foregoing statements are true and correct. Min Inn C Hum LOBBYIST SIGNATURE I I		Subscribed and sworn to before me This 1243 day of Tankery, 2018 By: Lewis D. W. NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS Charlene M. Moriwaki My commission expires: 6/11/20	
	TIFICATION are attached F SUBJECTS (□ Community Service ☑ Housing □ Public Health, Sate ☐ PROCESS D ☐ ME	Amount Amount Amount Amount Amount Are attached	

Charlene M Moriwaki Doc Description Annual # Pages ____ First Circuit Report

Obligation On. Obligation Notary Signature NOTARY CERTIFICATION Charlene M. Moriwaki



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)			TELEPHONE	
			808-599-8370	
MAILING ADDRESS (Stree	et)	-		FAX 808-599-8342
733 Bishop Street, Suite 1400				606-599-6342
				EMAIL
(0)		Lieu		DebbieL@gentryhawaii.com
(City) Honolulu		(State) HI		(Zip Code)
	TD.			96813
LOBBYIST FIRM/EMPLOY	EK (Fill in only if yo	u are employed by a busine	ss entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
			EMAIL	
(City)		[(O(-1-)		
(City)		(State)		(Zip Code)
PART II ORGANIZA	TION			
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not a	bbreviate)	TELEPHONE
Gentry Homes, Ltd.		·	•	808-599-5558
MAILING ADDRESS (No. a	nd Street or I	P.O Box)		FAX
733 Bishop Street, Suite 1400			808-599-8342	
1700 Bishop Otreet, Oute 1700				EMAIL
			DebbieL@gentryhawaii.com	
(City) Honolulu	(State)		(Zip Code)	
Hollolutu				96813
PART III EXPENDIT	URES, B	Y TYPE		
Political Contributions	Amount	unt Receptions, Meals, Foo		
B	\$0		& Beverages	\$0
Preparation & Distribution	Amount Media Advertising		Amount	

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Other \$0

TOTAL \$0

of Lobbying Materials

Entertainment & Events

\$0

Amount \$0

DART WEEE COLLEGE	10.151011			
YOU RECEIVED FOR TH	NSATION, CON LE PURPOSE O	TRIBUTION F LOBBYII	NS AND MEMBERSHIP FEES	
Fees		Amount \$0		
Compensation		Amount \$0		
Contributions		Amount \$0		
Membership Fees		Amount \$0		
☐ Check here if additional sheets are attached		⊠ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism	
		3.0	□Specific Legislation:	
□Transportation	□Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept	
ØOther (indicate below):	E to alvolve:	phone		
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. NONE las of loll 8; Phane		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing stand correct. LOBBYIST SIGNATURE 1/3/18 DATE	atements are true	and		
Rev. 12/2017	Deadline: January NOTE: This is a		W C DE ME	

Rev. 12/2017

Doc Date: 1.3.18 # Pages; V Name: SYLVIA T. HAYASHI FIVS Circuit
Doc. Description: ANNUAL Report
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NOTARY CERTIFICATION
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* 87-548 *
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OF HAMILIE
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925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 9650 HOLULU
ETHICS COMMISSION
TEL: (808) 768-9242 FAX: (808) 768-7768 RECE | VED

Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

91.12.18/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE	
Luning, Debfa M A		808-599-8370
MAILING ADDRESS (Street)		FAX 000 500 0040
733 Bishop Street, Suite 1400		808-599-8342
		EMAIL
		DebbieL@gentryhawaii.com
(City) Honolulu	(State) HI	(Zip Code)
		96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or F	P.O Box)	FAX
¥		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Gentry Investment Properties /	808-599-5558
MAILING ADDRESS (No. and Street or P.O Box)	FAX 808-599-8342
733 Bishop Street, Suite 1400	000-399-0342
	EMAIL
	DebbieL@gentryhawaii.com
(City) Honolulu (State)	(Zip Code)
Tionolaid HI	96813

Political Contributions	Amount \$0	Receptions, Meals, Food & Beverages	Amount \$0
Preparation & Distribution of Lobbying Materials	Amount \$0	Media Advertising	Amount \$0
Entertainment & Events	Amount \$0	Other _{\$0}	
		TOTAL \$0	

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES
Fees		Amount \$0	
Compensation		Amount \$0	
Contributions		Amount \$0	
Membership Fees		Amount \$0	
☐ Check here if additional sheet	☐ Check here if additional sheets are attached		
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	YOULOBRIED
☐Business & Economic Development	□Community Servi		□Customer Services
□Culture & Arts	□Housing	7. 1.	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation	□Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept
TOther (indicate below): μομ ξ	Ko Violi 8 ipi	WW	
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO
1. NONE for of lots; phone		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CEI	RTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE /3/18 DATE		Subscribed and sworn to before me This 3/1 day of Jaway 7018 By: Day Of Jaway 7018 NOTABY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER DATHS My commission expires: 87-548	
Rev. 12/2017	Deadline: January	•	***************************************

Doc Date: 1.3.18 # Pages: Y
Name SYLVIA T. HAYASHI TUST Circuit
Doc. Description: Amual Report
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925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FURNIFIED ONLY
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Lyons, Timothy L.		808-537-4308
MAILING ADDRESS (Street) 188 Bishop St., Ste. 1003-1004		FAX ₈₀₈₋₅₃₃₋₂₇₃₉
		EMAIL timllyons@cs.com
(City) Honolulu	(City) _{Honolulu} (State) _{HI}	
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
TLC-The Legislative Center		808-537-4308
MAILING ADDRESS (No. and Street or 1188 Bishop St., Ste. 1003-1004	P.O Box)	FAX 808-533-2739
		EMAIL timilyons@cs.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96813

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	TELEPHONE	
Anheuser Busch Companies	916-442-2600	
MAILING ADDRESS (No. and Street or P.O Box) 1201 K Street, Ste. 730		FAX 314.256.6872
E-mail: Melissa.Ameluxen@anheuser-busch.com		EMAIL Melissa.Ameluxen@anheuser-bu
(City) Sacramento (State) CA		(Zip Code) 95814

Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL n/a	JP 3/28/17

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount		
Compensation		Amount \$2000.00		
Contributions		Amount	4, 2, p ₁ , p ₂ , p ₃ , p ₄ ,	
Membership Fees		Amount		
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development □Community Servic		ces	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism	
□Transportation □Zoning & Planning		Bill No(Year)_ Reso No(Year)_ Admin. Rule No Dept		
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. None		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DATE		Subscribed and sworn to before me This day of Jam., ZO18. By: NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER PATHS My commission expires: 103/15/7019		
Rev. 12/2017	Deadline: January NOTE: This is a			

Rev. 12/2017

HONGLULU ETHICS COMMISSION RECEIVED



PART I LOBBYIST

HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE, 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME (Last) (First) (Middle)				TELEPHONE	
Magana, Andrew	(808) 225-9378				
MAILING ADDRESS (Street		FAX			
615 Piikoi St.					
#402			EMAIL		
(Ciba)		1.0		andrewm@uber.com	
(City) Honolulu	(State) HI			(Zip Code)	
LOBBYIST FIRM/EMPLOYE	e antituthat has been retained to labbut	96814 TELEPHONE			
Uber Technologies, Inc	(, , ,	a and amproyed by a basing	is sinity that has been retained to topby	202-794-7387	
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX	
1455 Market Street, 4th Floor					
				EMAIL	
(City) San Francisco		(State) CA		(Zip Code)	
San Francisco		CA		94103	
24224626					
PART II ORGANIZA					
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not a	bbreviate)	TELEPHONE	
Uber Technologies, Inc				202-794-7387	
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX	
1455 Market Street, 4th Floor					
				EMAIL	
(City) San Francisco		(State) CA		(Zip Code)	
Gail Flancisco		CA		94103	
PART III EXPENDIT	IIDEC D	V TVDE			
		TITE			
Political Contributions			Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials			Media Advertising	Amount	
Entertainment & Events	Amount		Other		
			TOTAL 0.00		

Rev. 12/2017

Fees 81-211.W		Amount	
Compensation 10,000.00		Amount	
Contributions		Amount	
Membership Fees ☐ Check here if additional sheets are attached		Amount	
		□ n/a	
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic Development	□Community Serv	ices	□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	afety & Welfare	□Tourism
			☐Specific Legislation:
Transportation □Zoning & Planning		Bill No(Year)	
PART VI POLICY MAR		ECISIONS	
PART VI POLICY MAP INFLUENCE AND OU	ГСОМЕ	14	
PART VI POLICY MAN	FCOME tation Network Companies	14	
PART VI POLICY MANUAL PROPERTY OF THE PROPERTY	FCOME tation Network Companies	5.	
PART VI POLICY MAP INFLUENCE AND OU ¹ . Legislation related to Transpor ² . and associated products and s ³ .	TCOME tation Network Companies ervices	5.	YOU SOUGHT TO
PART VI POLICY MANIFICATION OF THE PART VI POLICY MANIFICATION OF THE PART VI LOBBYIST (PART VII LOBBYIST)	TCOME tation Network Companies ervices CERTIFICATION	4. 5.	YOU SOUGHT TO
PART VI POLICY MANINFLUENCE AND OUT 1. Legislation related to Transport 2. and associated products and statements 3. PART VII LOBBYIST (I hereby certify that the foregoin	TCOME tation Network Companies ervices CERTIFICATION	4. 5. Check her	YOU SOUGHT TO Te if additional sheets are attached and sworn to before me av of January 2018
PART VI POLICY MAP INFLUENCE AND OU 1. Legislation related to Transpor 2. and associated products and s 3. PART VII LOBBYIST (I hereby certify that the foregoin and correct.	TCOME tation Network Companies ervices CERTIFICATION	4. 5. Check her	YOU SOUGHT TO Te if additional sheets are attached
PART VI POLICY MAP INFLUENCE AND OU 1. Legislation related to Transpor 2. and associated products and s 3. PART VII LOBBYIST (I hereby certify that the foregoin and correct. LOBBY ST SIGNATURE	TCOME tation Network Companies ervices CERTIFICATION	4. 5. Check here Subscribed at This 8th da By:	YOU SOUGHT TO Te if additional sheets are attached and sworn to before me av of January 2018
PART VI POLICY MAP INFLUENCE AND OU 1. Legislation related to Transpor 2. and associated products and s 3. PART VII LOBBYIST (I hereby certify that the foregoin and correct. LOBBY ST SIGNATURE DATE Date: No Date # Pages: 2	tation Network Companies ervices CERTIFICATION ag statements are true CEY PAKIMINIA	Subscribed at This But do By: NOTARY OR ANY My commission	YOU SOUGHT TO Te if additional sheets are attached and sworn to before me ay of
PART VI POLICY MAP INFLUENCE AND OU 1. Legislation related to Transpor 2. and associated products and s 3. PART VII LOBBYIST (I hereby certify that the foregoin and correct. LOBBY ST SIGNATURE DATE DATE	tation Network Companies ervices CERTIFICATION ag statements are true	Subscribed at This But do By: NOTARY OR ANY My commission	YOU SOUGHT TO The if additional sheets are attached and sworn to before me any of

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NOTARY CERTIFICATION



Rev. 12/2017

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

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PART I LOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE	
Malinoski, Jódi, Lilia Aiki		808-538-6616
MAILING ADDRESS (Street)		FAX
PO 80X 2577		EMAIL JODI.MALINOSKI® Sierraclub.org
(City)	(State)	(Zip Code)
Honolyly	Hawaii	96803
LOBBYIST FIRM/EMPLOYER (Fill in only if you		TELEPHONE
sierra Club of Hawaii (Oahu Group)	808-538-6616
MAILING ADDRESS (No. and Street or F	P.O Box)	FAX
PO 80x 2577		EMAIL Sierra hawaii.chapter @ org
(City)	(Zip Code)	
Honolulu	Hawari	96803

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBE	TELEPHONE	
Sierra Club of Hawaii	808-538-6616	
MAILING ADDRESS (No. and Street or	FAX	
PO BOX 2577	EMAIL hawaii chapter	
	EMAIL hawaii.chapter © sierraclub.org	
(City) (State)		(Zip Code)
Honoluly	Hawaii	96803

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount	0	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	0	Media Advertising	Amount ()
Entertainment & Events	Amount	0	Other	
te of Hawaii commission expires: April 5, 2021		MINISTER OF STREET	TOTAL ()	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
		Amount		
Compensation		Amount \$	7,027.20	
Contributions		Amount		
Membership Fees	81.	Amount		
☐ Check here if additional sheets	are attached	□ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	☑Housing		☑Public Works, Infrastructure & Sustainability	
☑Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism	
☑Transportation	☑Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING	G PROCESS D	ECISIONS	YOU SOUGHT TO	
INFLUENCE AND OUTCO	OME			
1. Bill 57 (2016) - Engoted 2. Bill 59 (2016) - Engoted		7. 6111 79 (2017) - Passed 2nd reading 8. Resolution 17-237 - Adopted		
3. Bill 67 (2016) - Enacted 4. Bill 25 (2017) - Enacted		9. Resolution 17-238 - Adopted io. Resolution 17-284 - Adopted		
5. Bill 1 (2017) - Deferred i 6. Bill 71 (2017) - Deferred i		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CERTIFICATION				
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me		
LOBBYIST SIGNATURE 1/10/17 DATE DATE		MUTSUKO CARAULIA NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS Motory Public, First Judicial Circuit State of Hawaii		
		MANP 10	2018 Doc. Date commission expires: April 5 2021 2 Name: 10/10/15/12/20 / Circuit Dec. Description: - Armal Reprot	

Deadline: January 10 of Each Year NOTE: This is a public electric agranture

Rev. 12/2017

ure

k I

Date



PART I LOBBYIST

NAME (Last) (First) (Middle)

MARCUS, KENNETH B.

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR SPECIAL RECEIVED

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TELEPHONE

(808) 537-6100

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

MAILING ADDRESS (Street)			FAX (808) 537-5434		
733 BISHOP STREET, SUITE 1900				EMAIL	
				kmarcus@starnlaw.com	
(City) HONOLULU	(City) HONOLULU (State) HAWAII			(Zip Code)	
				96813	
LOBBYIST FIRM/EMPLOYE	s entity that has been retained to lobby)	TELEPHONE			
STARN O'TOOLE MARCUS &	FISHER			(808) 537-6100	
MAILING ADDRESS (No. ar	nd Street or	P.O Box)		FAX (808) 537-5434	
733 BISHOP STREET, SUITE	1900				
				EMAIL	
(City)		(State) HAWAII		(Zip Code)	
HONOLULU		HAWAII		96813	
PART II ORGANIZA					
NAME OF ORGANIZATION		BY FOR (Do not a	bbreviate)	TELEPHONE	
PARK HOTELS & RESORTS I	NC:			(703) 584-7979	
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX	
1600 TYSONS BOULEVARD,	10TH FLOO	R		EMAIL	
				EMAIL	
(City) MCLEAN		(State) VIRGINIA		(Zip Code)	
MCLEAN		VIRGINIA		22102	
DADT III EVDENDIT	UDEO I	2)/ T/DE			
PART III EXPENDIT		SYIYPE			
Political Contributions	Amount		Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount		Media Advertising	Amount	
Entertainment & Events	Amount		Other		
			TOTAL 0		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount \$4,071.73		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	are attached	□ n/a		
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	⊠Tourism	
□Transportation	⊠Zoning & Planning		Bill No(Year)	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. INTRODUCTION & ADOPTION OF		4.		
2.		5.		
3.	3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CERTIFICATION				
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JANUARY 10, 2018 DATE		Subscribed and sworn to before me This 10TH day of JANUARY By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: 6/29/20/9		

Doc. Date: January 10, 2018 ☐ Undated at time of notarization Document Description: City and County of Honolulu Ethics Commission Lobbyist Annual Report for Kenneth B. Marcus (Park Hotels & Resorts Inc.) No. of Pages: 3 Jurisdiction: First Judicial Circuit Honolulu, Hawaii Augury 10, 2018 Signature of Notary Date of Notarization and Certification Statement

Bernadette A. Lee

Printed Name of Notary

(Official Stamp or Seal)



HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: <u>ethics@honolulu.gov</u> Website: <u>http://www.honolulu.gov/ethics/</u> THIS SPACE FOR OFFICE USE ONLY

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HONOLULU ETHICS COMMISSION RECEIVED

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PARTILOBB			18 JAN	112 AIU:19	
NAME (Last) (First)	(Middle)			TELEPHONE	
Marrone, Gladys Q.				808-629-7509	
	MAILING ADDRESS (Street)			FAX	
94-487 Akoki Street					
			EMAIL		
(City)		(State) HI		gqm@biahawaii.org	
(City) Waipahu		(Grato) HI		(Zip Code) 96797	
LOBBYIST FIRM/EMP	PLOYER (Fill in onl	ly if you are employed by a t	ousiness entity that has been retained to lobby)	TELEPHONE	
			The state of the s	TELEPHONE	
MAILING ADDRESS (I	No. and Street	or P.O Box)		FAV	
				FAX	
				EMAIL	
				LIVIAIL	
City)		(State)		(Zip Code)	
				(Zip Code)	
ART II ORGANI	ZATION		The state of the s		
ME OF OPCANIZATI	CHYOULO	201/1505 /5			
AME OF ORGANIZATI	ION YOU LOE	SBY FOR (Do no	ot abbreviate)	TELEPHONE	
ding Industry Association				808-629-7509	
ILING ADDRESS (No	and Street o	r P.O Box)		FAX	
87 Akoki Street				1.~	
				EMAIL	
				gqm@biahawaii.org	
) Waipahu		(State) HI			
valpallu		/HI		(Zip Code)	
				96797	
RT III EXPENDI	TURES F	BY TYPE			
al Contributions	Amount	7 1 1 1 hm			
- John Dations	Amount		Receptions, Meals, Food	d Amount	
ration & Distribution	& Beverages				
bying Materials	Amount		Media Advertising	Amount	
ainment & Events					
animonic & Events	Amount		Other		
			TOTAL OF		
			TOTAL &		

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Compensation Contributions		Amount	Amount		
		Amount \$2600.	.00		
		Amount			
		Amount			
		□ n/a			
PART V DESCRIPTION	ON OF SUBJECTS	ON WHICH	YOU LOBBIED		
☑Business & Economic Development	□Community Ser	CARRY SECTION STORY	□Customer Services		
Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability		
Parks & Recreation	□Public Health, S	Safety & Welfare	□Tourism		
Transportation	⊠Zoning & Planning		□Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.		
Other (indicate below): ART VI POLICY MA IFLUENCE AND OU Affordable housing requirement	TCOME	DECISIONS 4.	YOU SOUGHT TO		
ART VI POLICY MA IFLUENCE AND OU	TCOME	4.	YOU SOUGHT TO re if additional sheets are attached		
ART VI POLICY MA IFLUENCE AND OU	nts	4.			
ART VI POLICY MA IFLUENCE AND OU Affordable housing requiremen	CERTIFICATION ing statements are true	Subscribed a This 5/10 d By Tiresa S NOTARY OR ANY	re if additional sheets are attached and swom to before me		

Rev.



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

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-				
PART I LOBBYIST				
NAME (Last) (First) (Middle) /			TELEPHONE
MARUYAMA LIGA T. MAILING ADDRESS (Street) 1020 South Beretania 9t.				(808)384-5568
MAILING ADDRESS (Street)				FAX
1020 South Beret	tania St	1		·
				EMAIL Imaruy ama Cahano-haran.s.
(City) HonoLulu		(State) H		(Zip Gode) 4
LOBBYIST FIRM/EMPLOYI	R (Fill in only if yo	ou are employed by a busine	ss entity that has been retained to lobby)	TELEPHONE
		- 3		
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
				EMAIL
(City)		(State)		(Zip Code)
PART II ORGANIZA	TION			
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not a	bbreviate)	TELEPHONE
Hawaii Alliance of	- Nonprof	it Organizat	tions (HANO)	(808) 529 - 0454
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
1020 South Bereta				
	, .			EMAIL (Maruyama @ hono · honon
(City) Honolulu		(State)		(Zip Code) 96814
PART III EXPENDIT	URES, B	Y TYPE		
Political Contributions	Amount	D	Receptions, Meals, Food & Beverages	Amount _O
Preparation & Distribution of Lobbying Materials	Amount	0	Media Advertising	Amount ₀
Entertainment & Events	Amount	0	Other	
			TOTAL O	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING			
Fees		Amount	
Compensation		Amount 4	122.00
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sheets	are attached	□ n/a	
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	Community Service	ces	□Customer Services
□Culture & Arts	□Housing	•	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Saf	iety & Welfare	□Tourism
□Transportation	□Zoning & Planning	3	Specific Legislation: Bill No. 78 (Year) 2017 Reso No. (Year) Admin. Rule No. Dept.
☐Other (indicate below):			
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO
1. pill 78 (17) - Deferred &	10 0/2/18	4.	San
2.		5.	
3.		☐ Check here if additional sheets are attached	
DADELWI ABBUIOT OFF			
PART VII LOBBYIST CER	TIFICATION		Land William
I hereby certify that the foregoing sta and correct.	atements are true		nd sworn to before me
ann /			y of
LOBBYIST SIGNATURE		By:	OSCIONA AUTHORIZED TO ADMINISTED OATHO
1/10/18		My commissio	OFFICIAL AUTHORIZED TO ADMINISTER OATHS
DATE		Wiy Commissio	n expires.

Deadline: January 10th of Each Year NOTE: This is a public document

Rev. 12/2017

STATE OF HAWAII)) SS.	
CITY AND COUNTY OF HONOLULU)	
On this day of ANNA appeared WSA T. MARUYA me on the basis of satisfactory evidence, that such person executed the foregoing executed the same as the person's free act and the same as the person are act and the same are act an	who, being by me duly sworn or instrument, and acknowledged	or affirmed, did say that such person
Document Date:JAN 1 0 2016	No. of Pages:	NOING PAGE
Notary Name: LAURA F. WOODS		1st Circuit
Document Description: ANNVAL F	REPORT - LOBBYLLT	- Seaf WOODS
hethe	JAN 1.0 2018	NO 98-492
Notary Signature	Date	- O'ATE OF



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS COMMISSION RECEIVED

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PARTILOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Masatsug⊌, Jeffréy S.		808-554-3406
MAILING ADDRESS (Street)		FAX
P.O. Box 22534		
		EMAIL
(City) _{Honolulu}	(State) _{HI}	(Zip Code) 96823
LOBBYIST FIRM/EMPLOYER (Fill in only if)	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
JM Consulting LLC		808-554-3406
MAILING ADDRESS (No. and Street or P.O. Box 22534	FAX	
		EMAIL
(City) Honolulu	(State)	(Zip Code)
Honolulu	* * Honolulu	
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBI	BY FOR (Do not abbreviate)	TELEPHONE
Carpet, Linoleum and Soft Tile Local Union	·	808-554-3406
MAILING ADDRESS (No. and Street or	<u> </u>	FAX
222 S. Vineyard Blvd	1.0 200)	1700
PH4		EMAIL
(City) _{Honolulu} (State) _{HI}		(Zip Code)
		96813
DART III EVDENDITURES	DV TVDE	

PART III EXPENDITURES, BY TYPE			
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other ₀	
		TOTAL 0	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount 0		
Compensation		Amount 10000)	
Contributions		Amount 0		
Membership Fees		Amount 0		
☐ Check here if additional sheets	s are attached	⊠ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☑Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
⊠ Transportation	☑Zoning & Planning	g	□Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.	
☐Other (indicate below):				
DADT VI DOLLOV MAKIN	0.0000000000000000000000000000000000000	EOIOIONO	VOLLOGIE	
PART VI POLICY MAKIN INFLUENCE AND OUTCO		ECISIONS	YOU SOUGHT TO	
¹ . _{Bill} 3 (2016)		4. Resolution 1	7-305	
2. Resolution 17-42		5. Resolution 17-175		
3. Resolution 17-221		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			

I hereby certify that the foregoing statements are true and correct. Jeffrey S. Masatsugu LOBBYIST SIGNATURE		Subscribed and sworn to before me And day of ANUARY By By Tomberly Tomb		
1/9/2018	N. Sop.	TARE OF ANY	OFFICIAL AUTHORIZED TO ADMINISTER OATHS KIMBERLY L. ZIPP	
DATE	KING A STAT	Myconomissio	Notary Certificate on Back	

Doc. Date: 01-09.2019

Pages: 2

Name: Kimberly L. Zipp

Doc. Description: ANNUAL

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First Circuit

NOTARY CERTIFICATION





925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Masatsugu, Jeffrey S. /		808-554-3406
MAILING ADDRESS (Street) P.O. Box 22534		FAX
		EMAIL
(City) _{Honolulu}	(State) _{HI}	(Zip Code) 96823
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
JM Consulting LLC		808-554-3406
MAILING ADDRESS (No. and Street or P.O Box) P.O. Box 22534		FAX
	•	EMAIL
(City) Honolulu	(State)	(Zip Code)
i ioriolulu .	TH	96823
DART II ODGANIZATION		

PART II ORGANIZAT	TION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaii Tapers Market Recovery Trust Fund 🗸		808-554-3406
MAILING ADDRESS (No. and Street or P.O Box) 222 S. Vineyard Blvd		FAX
PH4		EMAIL
(City) Honolulu	(State)	(Zip Code)
Tionoldia		96813

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0	
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0	
Entertainment & Events	Amount 0	Other ₀ ,		
		TOTAL 0		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount 0		
Compensation		Amount 11250)	
Contributions		Amount 0		
Membership Fees		Amount 0		
☐ Check here if additional sheets are attached		🗷 n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
■Business & Economic Development	□Community Servi	ces	☐ Customer Services	
□Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
⊠ Transportation	⊠ Zoning & Planning		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
¹ ·Bill 3 (2016)		4. Resolution 1	7-305	
2. Resolution 17-42		5. Resolution 1	17-175	
3. Resolution 17-221		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION	•		
LOBBYIST SIGNATURE		NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS KIMBERLY I ZIPP		
DATE	* 06.78	My commission	Notary Certificate on Back	

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Doc. Date: 01.09.2018

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First Circuit

Name: Kimberly L. Zipp First

Doc. Description: ANNUAL REPORT

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PART I LOBBYIST

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME (Last) (First) (Middle)			TELEPHONE	
Masatsugu, Jeffrey S.			808-554-3406	
MAILING ADDRESS (Street)				FAX
P.O. Box 22534				
				EMAIL
(City) Honolulu		(State)		(Zip Code)
				96823
LOBBYIST FIRM/EMPLOY	ER (Fill in only if you	are employed by a busines	s entity that has been retained to lobby)	TELEPHONE
JM Consulting LLC				808-554-3406
MAILING ADDRESS (No. a P.O. Box 22534	nd Street or F	P.O Box)		FAX
, , , , , , , , , , , , , , , , , , , ,				EMAIL
(City)		(State)		(Zip Code)
(City) Honolulu		(Grato) _{HI}		96823
PART II ORGANIZA	TION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			bbreviate)	TELEPHONE
Hawaii Glaziers, Architectural	Metal Glasswo	orkers Local Unior	1889 AFL-CIO Stabilization	808-554-3406
MAILING ADDRESS (No. a 222 S. Vineyard Blvd	nd Street or F	P.O Box)		FAX
PH4				EMAIL
(City) _{Honolulu}	ty) Honolulu (State)			(Zip Code)
` 'Honolulu	, 'HI		96813	
PART III EXPENDIT	URES, B	Y TYPE		
Political Contributions	Amount 0		Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution	Amount Media Advertising		Amount	

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Other₀

TOTAL 0

of Lobbying Materials

Entertainment & Events

0

0

Amount

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount 0		
Compensation		Amount 11250)	
Contributions		Amount 0		
Membership Fees		Amount 0		
☐ Check here if additional sheet	s are attached	🗷 n/a		
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	ON WHICH YOU LOBBIED	
■Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
⊠ Transportation	I Zoning & Planning		Bill No(Year)	
☐Other (indicate below):				
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
¹ . _{Bill} 3 (2016)		4. Resolution 17-305		
2. Resolution 17-42		⁵ .Resolution 17-175		
3. Resolution 17-221		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CEI	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. Jeffrey S. Masatsugu LOBBYIST SIGNATURE 1/9/2018 DATE		Subscribed and sworn to before me This TH day of JANNARY NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS KIMBERLY L. ZIPP M. Sommission expires:		
	TIME OF	HALIM	Notary Certificate on Back	

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Pages:

Name: Kimberly L. Zipp

Name: Kimberly L. Zipp First Circuit

Doc. Description: ANNUAL REPORT

Signature NOTARY CERTIFICATION

01-09-2018 Date

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925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST	W = 0			
NAME (Last) (First) (Middle)				TELEPHONE
Masatsugu, Jeffrey S.			808-554-3406	
MAILING ADDRESS (Street	t)			FAX
P.O. Box 22534				
			•	EMAIL
(City) _{Honolulu}	(City) _{Honolulu} (State) _{HI}			(Zip Code) 96823
LOBBYIST FIRM/EMPLOYE	ER (Fill in only if you are	employed by a busines:	s entity that has been retained to lobby)	TELEPHONE
JM Consulting LLC				808-554-3406
MAILING ADDRESS (No. a P.O. Box 22534	nd Street or P.O	Box)		FAX
				EMAIL
(City) Honolulu		State)		(Zip Code)
' 'Honolulu		'HI		96823
PART II ORGANIZA	TION			
NAME OF ORGANIZATION		OR (Do not al	hhreviate)	TELEPHONE
Painting Industry of Hawaii Lat		•	,	808-554-3406
MAILING ADDRESS (No. a	_	,	dot i dila-	FAX
222 S. Vineyard Blvd, PH4	0. 1 10 10010110	, DOX)		
				EMAIL
(City) Honolulu	(St	ate) HI	g , comp	(Zip Code) 96813
				00010
PART III EXPENDIT	URES, BY	TYPE	a	
Political Contributions	Amount 0		Receptions, Meals, Food & Beverages	i Amount 0
Preparation & Distribution	Amount		Media Advertising	Amount
of Lobbying Materials Entertainment & Events	0 Amount		Other ₀	0
Littertainment & Events	0		0	
	6		TOTAL 0	

PART IV FEES, COMPEN YOU RECEIVED FOR TH	-		NS AND MEMBERSHIP FEES
Fees		Amount 0	
Compensation		Amount 11250)
Contributions		Amount 0	
Membership Fees		Amount 0	
☐ Check here if additional sheets	are attached	⊠ n/a	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
☑Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	■Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
⊠ Transportation	⊠ Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO
¹ . _{Bill} 3 (2016)	• •	4. Resolution 17	7-305
2. Resolution 17-42		5. Resolution 17-175	
3. Resolution 17-221	1 135.121031	☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION		
I hereby certify that the foregoing statements are true and correct. Jeffrey S. Masatsugu LOBBYIST SIGNATURE 1/9/2018		Subscribed and sworn to before me A Hais day of JANUARY 2018 TO MONTH DESCRIPTION OF ICIAL AUTHORIZED TO ADMINISTER OATHS KIMBERLY L. ZIPP	
DATE	TININ STA	My commission	Notary Certificate on Back

Doc. Date: 01-09-2018

#Pages: 2

Name: Kimberly L. Zipp Doc. Description: ANNUAL

First Circuit

NOTARY CERTIFICATION





925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
MATSUNAMI, GARRET		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you	TELEPHONE	
CASTLE & COOKE HOMES HAWAII, INC	(808) 548-4188	
MAILING ADDRESS (No. and Street or 680 IWILEI ROAD, SUITE 510	FAX (808) 548-2975	
OUT WILLIAMS, OUT LOTS	EMAIL gmatsunami@castlecooke.com	
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION \	TELEPHONE	
CASTLE & COOKE HOMES H	(808) 548-4811	
MAILING ADDRESS (No. and	FAX (808) 548-2975	
680 IWILEI ROAD, SUITE 510	EMAIL	
		-141/ //te
(City)	(State)	(Zip Code)
(HONOLULU	HAVVAII	96817

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other _{0.00}	
		TOTAL 0.00	

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PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	are attached	⊠ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
⊠Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	⊠Housing		☑ Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
⊠Transportation	⊠Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
Other (indicate below): PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO				
1. N/A 4.				
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYST SIGNATURE JAN - 8 2018 DATE		Subscribed and sworn to before me OKO P This day of Panuary 2018 By: KYOKO PATOC, State of Hawail No. 96-312 NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER OAFFIS: June 14, 2020		
Kyoko Patoc Doc. Description A First Judicial Discust Translation Rev. 12/2017 Rev. 12/2017 Kyoko Patoc First Judicial Discust Translation Doc. Description A First Judicial Discust Translation Page Pade Inc. 12/2017 Page Pade Inc. 12/2017 Notary Signature Notary Signature				



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HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

*18 JAN 19 A10:43

T AITT LODD 1131				_
NAME (Last) (First) (Middle)	NAME (Last) (First) (Middle)			TELEPHONE
McClellan, WilliamHenry Kekoa			8083937937	
MAILING ADDRESS (Street) 87855 C Farrington Hwy.			FAX	
				EMAIL kekoamcclellan@gmail.com
(City) _{Maili}		(State) _{HI}		(Zip Code) 96792
LOBBYIST FIRM/EMPLOYER	R (Fill in only if yo	u are employed by a busine:	ss entity that has been retained to lobby)	TELEPHONE
The McClellan Group, LLC				8083937937
MAILING ADDRESS (No. and 87855 C Farrington Hwy.	Street or	P.O Box)		FAX
				EMAIL kekoamcclellan@gmail.com
(City) _{Maili}		(State) HI		(Zip Code) 96792
PART II ORGANIZAT	ION			
		V FOD /D :		TELEBLIONE
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			ibbreviate)	TELEPHONE
The American Hotel and Lodging	J Associatio	n /		202.289.3125
MAILING ADDRESS (No. and 1250 I St. NW Suite 1100	Street or I	P.O Box)		FAX
				EMAIL
(City) Washington DC		(State)		(Zip Code) 2005
PART III EXPENDITU	IRES, B	YTYPE		
Political Contributions 0	Amount		Receptions, Meals, Food & Beverages	Amount 0

Deadline: January 10th of Each Year

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES				
YOU RECEIVED FOR THE PURPOSE OF Fees		Amount 0		
			6.00	
Compensation		Amount 52,35	0.00	
Contributions		Amount ⁰		
Membership Fees		Amount 0		
☐ Check here if additional sheets	are attached	I n/a		
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED	
☑Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	■Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	≝ Public Health, Sa	fety & Welfare	■Tourism	
□Transportation	■Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
■Other (indicate below):	,			
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. Short Term Rental Regulation		4. Policy affecting hotel and lodging operators		
2. LUO Amendments		5. Policies affecting members of AHLA		
3. Policy related to housing and homele	essness	☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	TIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 19- Janes - Zo19 DATE		Subscribed and sworn to before me This		

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Signature	W C. Lynou	Date	9 20 18





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TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN 19 A10:42

PART I LOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE	
McClellan, WilliamHenry Kekoa		8083937937
MAILING ADDRESS (Street)		FAX
87855 C Farrington Hwy.		
		EMAIL
		kekoamcclellan@gmail.com
(City) _{Maili}	(State)	(Zip Code)
iviaiii	П	96792
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
The McClellan Group, LLC		8083937937
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
87855 C Farrington Hwy.		
		EMAIL
		kekoamcclellan@gmail.com
(City) _{Maili}	(State)	(Zip Code)
ivialii	П	96792

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE		
Park Hotels and Resorts Inc.		703.584.7979		
MAILING ADDRESS (No. and Street or P.O Box)		FAX		
1600 Tysons Blvd. 10th floor				
		EMAIL		
(City) Mclean	(State) VA	(Zip Code) 22102		

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0		
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0		
Entertainment & Events	Amount 0	Other 0			
		TOTAL 0	1 52 5 50		

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Fees		Amount 0	
Compensation		Amount 10,23	37.50
Contributions		Amount 0	
Membership Fees		Amount 0	
☐ Check here if additional sheets are attached		☑ n/a	
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	I YOU LOBBIED
☑Business & Economic Development	□Community Servi		□Customer Services
☐Culture & Arts	☑Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	☑Public Health, Sa	fety & Welfare	☑Tourism
☑ Transportation ☑ Other (indicate below): PART VI POLICY MAKE	✓Zoning & Plannin		Bill No(Year)_ Reso No. 303
1. LUO Amendments	ГСОМЕ	4. Policies relat	and to the Department of Planning and Permit
2. Policies affecting hotel owners		4. Policies related to the Department of Planning and Permitt 5. Policies related to the Department of Planning and Permitt	
3. Policies related to the General I	,	Policies related to the Department of Design and Construc	
Policies related to the General I	ran and Transportation	☐ Check here if additional sheets are attached	
PART VII LOBBYIST (
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 19 - 20/9 DATE		This 19 da By: Inocen NOTARY OR ANY O	DFFICIAL AUTHORIZED TO ADMINISTER OATHS
ev. 12/2017	Deadline: Januar	v 10 th of Each Y	98-487 * = 0

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Name: Inocencio C. Ignacio First Circuit	
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Signature Date NOTARY CERTIFICATION NOTARY CERTIFICATION 98-487 98-487	



PART I LOBBYIST

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME (Last) (First) (Middle)			TELEPHONE
Middlebrook, Matt				(415) 389-6800
MAILING ADDRESS (Stree	et)	•		FAX (415) 388-6874
c/o 2350 Kerner Blvd., Ste. 250				
				EMAIL airbnb@nmgovlaw.com
(City) San Rafael	(State) CA			(Zip Code) 94901
LOBBYIST FIRM/EMPLOY N/A	ER (Fill in only if	you are employed by a busine	ess entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. a	and Street or	P.O Box)	=	FAX
V				EMAIL
(City)		(State)	n.	(Zip Code)
	77			
PART II ORGANIZA	ATION			
NAME OF ORGANIZATION	YOU LOB	BY FOR (Do not a	abbreviate)	TELEPHONE
Airbnb, Inc.				(415) 389-6800
MAILING ADDRESS (No. a	and Street or	P.O Box)		FAX (415) 388-6874
c/o 2350 Kerner Blvd., Ste. 25	0			
				EMAIL airbnb@nmgovlaw.com
(City) San Rafael	1	(State) CA		(Zip Code) 94901
PART III EXPENDIT	TURES, I	BY TYPE		
Political Contributions	Amount 0.00		Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00		Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00		Other Travel: \$2,000	
			TOTAL \$2,000	

Fees Programme Billion		Amount 0.00		
Compensation		Amount \$3,20	Amount \$3,200.00	
Contributions		Amount 0.00	Amount 0.00	
Membership Fees		Amount 0.00	Amount 0.00	
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development	□Community Servi	ces	☐Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
☐Transportation		g	Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.	
Short-term rental regulations PART VI POLICY MAK INFLUENCE AND OUT		,	YOU SOUGHT TO	
	1. Resolution 17-163; Adoped			
1. Resolution 17-163; Adoped		4.		
1. Resolution 17-163; Adoped 2. Resolution 17-164; Adopted		5.		
Resolution 17-163; Adoped Resolution 17-164; Adopted	d	5.	e if additional sheets are attached	
1. Resolution 17-163; Adoped 2. Resolution 17-164; Adopted		5.	e if additional sheets are attached	

PLEASE SEE ATTATCHED

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See Attached Document (Notary to cross out See Statement Below (Lines 1–6 to be comple	
1	
3	
4	
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°	
Signature of Desument Signar No. 1	Circulation of December Circum No. O. (if and
Signature of Document Signer No. 1	Signature of Document Signer No. 2 (if any)
	icate verifies only the identity of the individual who signed the the truthfulness, accuracy, or validity of that document.
State of California	Subscribed and sworn to (or affirmed) before me
County of SAN FRANCISCO	, , , ,
	on this 5tH day of JANUARY , 2018,
	(1) MATTHEW MIDDLE BROOK
	(1) INFITTIEW INTOJUE BROOK
	(and (2)),
WILLIE CHAVEZ Notary Public - California	Name(s) of Signer(s)
San Francisco County Commission # 2174713 My Comm. Expires Dec 4, 2020	proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.
	Λ_{\geq}
	Signature MAY
	Signature of Notary Public
Seal	
Place Notary Seal Above	PTIONAL
	is information can deter alteration of the document or nis form to an unintended document.
Description of Attached Document	AL REPORT
Title or Type of Document:	Document Date: 1/5/18
Number of Pages: Signer(s) Other Than N	lamed Above:
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18 JAN -9 P3:01

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
MIRIKITANÍ, RICHARD K.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only If you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL rmirikitani@castlecooke.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC.		(808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL
(City) HONOLULU (State) HAWAII		(Zip Code)
HONOLULU	96817	

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00		
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00		
Entertainment & Events	Amount 0.00	Other 0.00			
		TOTAL 0.00			

Deadline: January 10th of Each Year NOTE: This is a public document

Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets are attached		⊠ n/a		
PART V DESCRIPTION	ON OF SUBJECTS	ON WHICH	I YOU LOBBIED	
□Business & Economic Development	□Community Ser	vices	□Customer Services	
□Culture & Arts	⊠Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, S	afety & Welfare	□Tourism	
□Transportation		ing	□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MA		DECISIONS	YOU SOUGHT TO	
1. _{N/A}		4.		
2.		5.	5.	
2.				
		☐ Check hei	e if additional sheets are attached	
2. 3. PART VII LOBBYIST	CERTIFICATION	☐ Check her	re if additional sheets are attached	



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
MIRIKITANI, RICHARD K.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		
		EMAIL
(City) HONOLULU	(State)	(Zip Code) 96817
	if you are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street 680 IWILEI ROAD, SUITE 510	FAX (808) 548-2975	
SOUTH TOAD, SOITE STO	EMAIL rmirikitani@castlecooke.com	
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
CASTLE & COOKE PROPERT	(808) 548-4811	
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL
(City) HONOLULU (State) HAWAII		(Zip Code)
HONOLULU	ПАУУАП	96817

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other 0.00	
		TOTAL 0.00	

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES	
Fees C C C C C C C C C C C C C C C C C C		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees	***	Amount		
☐ Check here if additional sheets	are attached	⊠ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development	□Community Servi	ces	□ Customer Services	
□Culture & Arts	⊠Housing		☐ Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
□Transportation	☑Zoning & Planning		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME			YOU SOUGHT TO	
1. _{N/A} 4.				
2.		5.		
3.		☐ Check her	e if additional sheets are attached	
PART VII LOBBYIST CERTIFICATION				
And correct. This Day of the commission of the		This da		
Rev. 12/2017 Notery Signature Rev. 12/2017 Notery Signature Rev. 12/2017	ges: Januar Mr Deadline: Januar Mr Deadline: Januar	y 10 th of Each Y public documer	ear	



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE	
MIRIKITANI, RICHARD K.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		, ,
		EMAIL
(City) HONOLULU	(State)	(Zip Code)
HONOLULU	HAVVAII	96817
LOBBYIST FIRM/EMPLOYER (Fill in only if y	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC	(808) 548-4188	
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		
		EMAIL
		rmirikitani@castlecooke.com
(City)	(State)	(Zip Code)
HONOLOLO	HAVVAIL	96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
CASTLE & COOKE, INC.	(808) 548-4811	
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code)
HONOLULU	HAVAII	96817

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other 0.00	
		TOTAL 0.00	

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES	
Fees q e- un gr		Amount		
		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	are attached	⊠ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development	□Community Service		□Customer Services	
□Culture & Arts	⊠Housing		□ Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
			☐Specific Legislation:	
□Transportation	☑Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
1. N/A	.72	4.		
2.	5.			
3.		☐ Check her	e if additional sheets are attached	
PART VII LOBBYIST CERTIFICATION				
I hereby certify that the foregoing stand correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION	atements are true	This day of January 2018 By: WYOKO PATOC, State of Hawaii RY ON ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: June 14, 2020 No. 96-313		
Rev. 12/2017 Notary Signature Kyoko Patoc Fifst Judic Fifst Judic Fifst Judic Figure 12/2017 Figure 12/	ial Circuit Cueadline: Januar Cuinnin OTE: This is a			



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TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFIC**申D制意DNLV** ETHICS COMMISSION RECEIVED

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)		TELEPHONE	
Morris, George A. "Red"		(808) 531-4551	
MAILING ADDRESS (Street)		FAX (808) 533-4601	
222 South Vineyard Street, Suite 401			
		EMAIL gamorrisinc@gmail.com	
(City) Honolulu	(State) HI	(Zip Code) 96813	
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE	
Capitol Consultants of Hawaii, LLP		(808) 531-4551	
MAILING ADDRESS (No. and Street or P.O Box) 222 South Vineyard Street, Suite 401		FAX (808) 531-4551	
		EMAIL gamorrisinc@gmail.com	
(City) Honolulu	(State) HI	(Zip Code) 96813	

PART II ORGANIZAT	TON		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
American Chemistry Council		(916) 448-2581	
MAILING ADDRESS (No. and Street or P.O Box) 1121 L Street, Suite 609		FAX (916) 442-2449	
		(910) 442-2449	
		EMAIL	
		Tim_Shestek@americanchemistr	
(City) Sacramento	(State)	(Zip Code)	
Sacramento	L CA	95814	

Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL -NA-	

PART VII LOBBYIST CERTIFICATION	ರಾಷ್ಟ್ರೀ ಕ್ಷಮಾರ್	214 T
I hereby certify that the foregoing statements are true and correct. LOBETIST SIGNATURE DATE	Subscribed and sworn to be This 1049 day of By: Tallium 1. Study NOTARY OR ANY OFFICIAL AUTHORI My commission expires: September 13, 2019	IZED TO ADMINISTER OATHS IZED TO ADMINISTER OATHS NOTARY
		PUBLIC 4

Rev. 12/2017

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CERTIFICATION ON BACK

Doc. Date: #1 10 2018 # Pages 2
Notary Name: Valerie N. Tsutsumi First Circuit
Doc. Description Honolyly Ethics Commission
Annual Report
Talere O. Spellian 01/10/2018
Notary Signature / Date

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)		TELEPHONE	
Morris, George "Red" A.		(808) 531-4551	
MAILING ADDRESS (Street)		FAX(808) 533-4601	
222 South Vineyard Street, Suite 40	1	(808) 533-4601	
		EMAIL red.morris@808cch.com	
^(City) Honolulu	(State)HI	(Zip Code) 96813	
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE	
Capitol Consultants of Hawaii, LLP		(808) 531-4551	
MAILING ADDRESS (No. and Street or P.O Box) 222 South Vineyard Street, suite 401		FAX (808) 533-4601	
		EMAIL	
		red.morris@808cch.com	
(City) Honolulu	(State) HI	(Zip Code)	
Tionolaid	111	96813	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Charley's Taxi		(808) 233-3333
MAILING ADDRESS (No. and Street or P.O Box)		FAX
1451 S King Street, Suite 300		
		EMAIL dale@charleystaxi.com
^(City) Honolulu	(State)	(Zip Code)
Honoidia		96813

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL n/a	

. JO HEOLIVED I OR	THE PURPOSE C		NS AND MEMBERSHIP FEES	
Fees		Amount	Amount	
Compensation		Amount \$1,04	47.12	
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets are attached		□ n/a	□ n/a	
PART V DESCRIPTION	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Serv	rices	□Customer Services	
□Culture & Arts	□Housing	_	□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	afety & Welfare	□Tourism	
I Transportation	ansportation □Zoning & Planning		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
PART VI POLICY MAK INFLUENCE AND OUT 1. Bill 16-65 Re-referred		-	YOU SOUGHT TO Passed Third Reading	
² ·Bill 16-55 passed		5.Bill 17-85 Re-referred		
		^{5.} Bill 17-85 F	Re-referred	
			Re-referred	
3.Bill 16-56 Re-referred PART VII LOBBYIST C	ERTIFICATION			
³ ·Bill 16-56 Re-referred		Subscribed and This Alam da By: Turne NOTARY OR ANY OR	e if additional sheets are attached and sworn to before me by of March 2018 OFFICIAL AUTHORIZED TO ADMINISTER PATHS I. TSUTSUMI on expires:	



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
MURAKÁMI, JAYĆEN, E		(808) 591-6508
MAILING ADDRESS (Street) 850 RICHARDS STREET, SUITE 201		FAX
		EMAIL JAYLEN@HIPHI.ORG
(City) HONOLULU	(State) _{HI}	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE
MAILING ADDRESS (No. and Street or P.O Box)		FAX
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZAT	TION	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
HAWAII PUBLIC HEALTH INSTITUTE/		(808) 591-6508
MAILING ADDRESS (No. and Street or P.O Box) 850 RICHARDS STREET, SUITE 201		FAX
		EMAIL
(City)	(State) HI	(Zip Code) 96813

PART III EXPENDIT	URES, BY TYPE		
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount \$95.27	Media Advertising	Amount
Entertainment & Events	Amount	Other	
	(In dien fapens day & III)	MTOTAL \$ 95.27	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES	
Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	□Housing		☐Public Works, Infrastructure & Sustainability	
□Parks & Recreation	⊠ Public Health, Sa	fety & Welfare	□Tourism	
□Transportation	□Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. Bill 70, passed		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. March Common Comm		Subscribed and sworn to before me This		
Rev. 12/2017	Deadline: January	10 th of Each Y	d Notary Certificate	

Brand Harry	Don Dolai	on S. Kaneshi	# Pages: 2	S. KANES	Pool .
6	Notary Signature	Date	22018	NOTARY PUBLIC No. 05-271	*